CERTIFICATE of Employment

fro	This is to certify that m	up to	was an er	mployee of as .	
ma	This certification is being serve.	ng issued to Mr.	/Ms.		for whatever legal purpose i
	Given this day of		,	at	
	Employer's Name:				
	Employer's Position / Designation:				
	Date:				
E	Employer's Signature:				
	Office Telephone Number:				
İ	Mobile / Cell Number:				
	Email Address:				
	Office Address:				