## (To be issued on letter head of Company/PCS)

## **ANNEXURE-IV**

## Completion Certificate of 15 months/ 12 months/ 24 months/ 36 months Training

		Company		Secretary		(or
of		·				_ `
S			Stu	dent l	Registratio	n No.
ns from		to			$_{}$ and $^{\dagger}$	nis/her
bove mentione	d pe	riod he/she	was no	t given	n any leave	/given
	-				-	_
Compa	ny S	ecretary (or	Practicin	ng Con	npany Secr	etary)
	_					• •
Signatu	ıre &	Stamp:-				
Name:	-					
Design	atior	1:-				
(Comp	any	Secretary/H	R Head/	Direct	tor)	
AC:S/F	-CS I	No ·-				
	of	sas completed the Secretaries of dateds froms  Company S  Signature & Name:-  Designation (Company)	conf	of	Student as completed the prescribed training as s Secretaries of India, vide their dated under our or some from to Company Secretary (or Practicing Cor Signature & Stamp:-  Name:-  Designation:-  (Company Secretary/HR Head/ Directions of Directions Company Secretary/HR Head/ Directions Company Sec	ofStudent Registration as completed the prescribed training as sponsored to Secretaries of India, vide their letter dated under our organization in from to and the soove mentioned period he/she was not given any leave over mentioned period he/she was not given any leave Signature & Stamp:-  Name:-  Designation:-  (Company Secretary/HR Head/ Director)