**01 June 2024**

**To  Whom It May Concern**

 This is to certify that **Mr/Ms. [Employee Name]** has been employed with **[Hospital Name]** as a **[Designation]** from **[Date]** to **[Date].**

During **his/her** tenure with us, we found **him/her** to be very hardworking, honest, and reliable, and **his/her** job was up to our expectations.

We wish **him/her** all the best for his/her career and future endeavors.

For the **[Hospital Name]**

Authorized Signatory.