*Annex No. 15 to Regulation No 95/2020*

..........................................................................

Company seal

 ................................................

date

**CERTIFICATE**

Of employment

 **I , hereby, certify** that Ms/Mr ......................................................... Personal Identification Number ……………………......………has been employed in our company for a fixed-term employment in the period from ....................................... to ........................................ /for unlimited period since ……………………………………\*

.................................................. .......
(signature of the director of the workplace

 or authorized person)

\* delete as appropriate