**LETTER OF IDENTIFICATION**

**(TO BE PRODUCED AT THE EXAMINATION HALL)**

This is to certify that **Name of the Officer** is working as an **Designation** under D.D.O. Office Address. His signature is attested below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(*Signature of the issuing officer with designation seal and date*)**

Full name of the candidate in block letters: **NAME OF THE OFFICER**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(*Signature of the candidate*)

Attested

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(*Signature of the attesting officer with designation seal and date*)