[Company Name]

[Company Address] [Date]

BONAFIDE CERTIFICATE

This is to certify that **[Employee's Full Name]**, son/daughter of **[Parent's Name]**, is a permanent/temporary employee of **[Company Name]**. They have been working in our organization as a **[Designation]** since **[Start Date]**.

During their tenure, they have been associated with [Department/Team Name] and have been drawing a monthly salary of [Salary Amount].

This certificate is issued upon their request for [Purpose, e.g., applying for a visa, bank loan, etc.].

We confirm that the information provided is accurate to the best of our knowledge and can be verified upon request.

For [Company Name],	
Signature:	
Name:	
Designation:	
Contact Information:	
Seal of the Organization:	