Annexure VI

Undertaking For Experience

I the undersigned Mr./Mrs./Ms. _____ hereby declare that I have Minimum _____ years of post-qualification experience. Duties performed by me during the period are as under:-

Name of Organization	Designation, Grade & Pay scale	From dd/mm/yy	To dd/mm/yy	Total period	Dept/Plant	Duties	Place of posting

I hereby declare that the above information & documents submitted by me are true and I take the full responsibility for any consequences including termination of my services with RCF in case it is found to be false / incorrect / forged in future.

Signature of the Candidate

Name: _____

Date: _____

Place: _____