

**ENDORSEMENT OF THE EMPLOYER (wherever applicable)**  
**(in organization letter head)**

Ref. No....., Date.....

1. Shri/Smt/Dr./Kum\_\_\_\_\_ is a permanent / temporary employee of this organization holding the post of \_\_\_\_\_, w.e.f.\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ in the Pay Level / Scale of Rs.\_\_\_\_\_. He / She is presently drawing a Pay of Rs.\_\_\_\_\_.
2. Certified that the information given by the applicant in this application form has been verified and found to be correct with reference to her/his service records in this institution. We have no objection for his/her application being considered by State Institute of Hotel Management, Balangir. In case of selection, the applicant will be relieved as per rules.
3. Certified that no vigilance case is pending/contemplated against the applicant and that she/he is clear from the vigilance angle.

**Signature of the Employer (with office seal)**