[Company name]

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Relieving Letter

Confirming that an employee has been relieved of duties, with the last working day and the service period.

Service record

Reference: [Reference number]

Employee: [Employee name]

Employee ID: [Employee ID]

Job title: [Job title]

Department: [Department]

For verification, contact [Contact name], [Contact role].

This is to certify that

[Employee name]

was employed by [Company name] as [Job title], from [Employment start date] to [Last working day], and was relieved of duties with effect from [Last working day].

No dues remain outstanding.

Authorised signatory: _____ **Date:** _____

Company seal: _____