[Company name]

How to use this document: delete this paragraph before saving, sharing, or circulating it. Every part shown in blue is yours to replace: type your own details over each blue **[field]** until no blue remains. Then select all (Ctrl+A) and set the font colour to the same dark colour throughout. What is left is your finished document.

Salary Certificate

Policy number: **[Policy number]**	**Insurer:** **[Insurance company]**	**Date:** **[DD Month YYYY]**

To **[Insurance company]**

Dear Sir or Madam,

This is to certify that **[Employee name]**, Employee ID **[EMP-0001]**, is employed with **[Company name]** as **[Job title]** in the **[Department]** department. They joined **[Company name]** on **[Date of joining]** and their employment status is **[Employment status]**.

Their current salary is **[Monthly salary]** per month, which is **[Annual salary]** per year. Their net pay is **[Net pay]** per month.

This certificate is issued at the request of the employee for an insurance application under policy number **[Policy number]**.

This certificate is issued on **[Issued date]** and states the position as at that date.

Authorised signature: **[Signature]**
Name: **[Authorised signatory name]**
Designation: **[Signatory designation]**
Date: **[Issued date]**
Company stamp: _____