PROFORMA FOR PRACTICAL EXPERIENCE CERTIFICATE IN GAS TESTING

Ref. No	Date
This is to certify that (Name of	Candidate) (whose
signature is appended below) Son / Daughter/ Wife of	
	gases normally present in a mine environment at
Name of VTC/ GVTC	-
<u>Owner</u> from to	and is familiar with the functioning of the
following instruments/apparatus;	
1.	
2. 3.	
4.	
(Please mention the name of gas detecting apparatus (Toximeter, Oximeter, Explosimeter etc.)	e.g. Flame Safety Lamp, Methanometer, Multigas Detector,
In my opinion he / she is able to test for the presence of	of gases normally present in a mine environment.
Date:	*(Signature of Issuing Official) (Vocational Training Officer)
	(vocational Training Officer)
(Signature of Candidate)	
	(Official Seal of Issuing Official)
Name of Issuing Official	:
Name of the Company/Owner	:
Designation	:
Complete Postal Address	:
State:	Pin code:

^{*} Above certificate shall be considered valid only if issued by Vocational Training Officer, in-charge of the Vocational Training Centre/ Group Vocational Training Centre approved under Vocational Training Rules, 1966 and having necessary infrastructure and training facility for testing of mine gases. Certificate issued by any official other than those mentioned above shall not be considered. Practical experience, for a period of less than one week shall not be considered.