

# Suitability Assessment Certification

This is to certify that the individual named below has undergone a suitability assessment as per the organization's requirements.

Full Name:

Position/Role:

Date of Assessment:

Assessment Result:

Assessor's Name:

**Certification Statement:**

I hereby confirm that the above-named individual has been assessed for suitability based on our established criteria and processes.

\_\_\_\_\_  
Signature of Assessor

\_\_\_\_\_  
Date