

# CERTIFICATE OF GOOD STANDING

This is to certify that \_\_\_\_\_ (Full Name), holder of  
ID/Passport No. \_\_\_\_\_, is a member in good  
standing of \_\_\_\_\_ (Organization/Institution Name).

Based on our records, the above-named individual has complied with all requirements and is currently recognized as a member in good standing as of the date below.

**Date Issued:** \_\_\_\_\_

**Membership No.:** \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
(Name & Position)