

MONTHLY UPDATE FOR ISSUED CERTIFICATES

		$M\Delta TION$

Consultant Name:	Customer No.:
PQ Certificate No.:	Update for the Month of

2. DETAILS OF CERTIFICATES

Sr No.	Issued to (Company Name/Person Name)	Type of Certificate (Training/Equipment Testing/Process Auditing)	Certificate No.	Date of Issue	Date of Expiry
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

- The consultant shall submit a list/details of issued certificates to clients working in RAKEZ on monthly basis between 1-5 of every month for the previous month to RAKEZ HS&E Department.
- Copy of this form duly filled should be sent through e-mail to hse@rakez.com.