**工 龄 证 明**

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| --- | --- | --- | --- | --- | --- |
| 姓名 |  | 性别 |  | 身份证号 |  |
|       兹证明\_\_\_\_\_\_\_\_\_\_\_\_\_于\_\_\_\_\_\_\_\_\_年\_\_\_\_月 至 \_\_\_\_\_\_\_\_\_年\_\_\_\_\_月在\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_工作，从事该职业工种的工龄合计已满\_\_\_\_\_\_年。 特此证明。                                 单位盖章：                                                年    月    日 |