

**Letter of Attestation**  
(to be submitted on employer's letterhead)

**Instructions**

The letter of attestation for employment experience must include **all** of the following points and is to be **submitted on the employer's letterhead**.

**General:**

- Name of applicant
- Address of applicant (including street address, city, province and postal code)
- Name of employer
- Address of employer (including street address, city, province, postal code, telephone and fax numbers)
- Name of supervisor (including telephone, fax and email address)
- Position of supervisor

**Information regarding the applicant:**

- Dates of applicant's employment in the position
- Name of position while performing disability management/return to work
- Roles and responsibilities performed in the position
- Supervisor's attestation of performance in accomplishing role outcomes

**Signatures:**

- Signed and dated by the applicant
- Signed and dated by the supervisor

**Submit original signed copy to:**

Certification Council  
c/o NIDMAR  
4755 Cherry Creek Road  
Port Alberni, BC V9Y 0A7  
Canada