Place:

 Date:

**To Whomsoever It May Concern**

 We are glad to offer this work experience certificate to Mr. **[ Employee Name]**, who has worked as a **Pharmacist** from **[Date]** to **[Date]**.

His key work responsibilities include:

1. Dispensing medicines as prescribed by doctors.
2. Keeping medication data up to date and verifying expired medications.
3. Explain dosage details and help patients take medication properly.
4. Maintaining a clean and customer-friendly workspace.
5. Check the expiration date and batch number of the drug and compare it to the invoice entry.
6. Billing the dispensed medicines and collecting the cash.
7. Compliance with all applicable rules, regulations, and legal processes.

We wish him a bright and prosperous future.

We take this opportunity to wish Mr. [Employee Name] all the very best in his future endeavours.

For the “**Company Name**”

Authorized Signatory.