

Date: _____

Dear LPE Administrator,

I, _____, herewith certify that, to the best of my knowledge,

our office and in agreement with our department's executive office intent to extend the contract of

_____ until _____

which is beyond the date of the LPE examination.

Sincerely yours,

Name of Supervisor

(First Reporting Officer)

Signature

Name of Second Reporting Officer

(Second Reporting Officer/Head of Officer)

Signature

Note: This letter must be signed by the Supervisor and Second Reporting Officer/Head of office to be valid.