

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

**KINGDOM OF SAUDI ARABIA**  
Ministry of Higher Education  
**Al-Imam Muhammad Ibn Saud**  
**Islamic University**



المملكة العربية السعودية  
وزارة التعليم العالي  
جامعة الإمام محمد بن سعود الإسلامية  
إدارة الرواتب والنفقات

Date: .../.../....

## SALARY CERTIFICATE

NAME OF EMPLOYEE :  
NATIONALITY :  
IDENTITY NO :  
CURRENT POST:.  
START DATE : .../.../.....  
BASIC SALARY : ( SR ..... ) .  
TRANSPORT ALLOWANCE : ( SR ..... )  
OTHER ALLOWANCE : (SR .....)  
TOTAL AMOUNT DUE : (SR .....) .

THE DEPARTMENT OF PERSONNEL AFFAIRS AT AL-IMAM UNIVERSITY  
CERTIFIES THAT THE ABOVE MENTIONED NAME IS ONE OF AL-IMAM  
UNIVERSITY FACULTY.

HE HAS BEEN GIVEN THIS CERTIFICATE UPON HIS REQUEST .

DIRECTOR OF SALARIES AND EXPENSES

AUTHORIZED OFFICER

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Official Stamp