

**Travel certificate – Travel during the curfew decreed by the
Government of Quebec**

I, the undersigned, representing the employer:

Name and last name:

Function :

Telephone number:

Organization:

Organization address:

certify that, during the curfew period decreed by the Government of Quebec, the person identified in this document is recognized by the organization that I represent as an essential resource for the achievement of its priority commitments or activities.

The following person must therefore travel between their home and their place of work, study or any place where their professional presence is required, during the curfew period:

Name and last name:

Function in the organization:

Home Address:

Work Address:

This authorization is valid from _____ 2021 to _____ 2021.

Signature

Date

For any questions, please call the following number:
