FORM-J

(See rule 11)

CONSENT OF WOMEN WORKER TO WORK IN NIGHTSHIFT

I Miss / Smt	residing at
	(Full Address)
state that I am working as (Designation	i)in M/s
	since I
am aware that, -	•
the employer will provide safe transpo	rt facility from the doorstep of my residence to the
place of work and vice-versa-and that	there will be at least three women worker working
in the nightshift and that there is a Cor	nmittee to prevent sexual harassment at work
place under the Chairmanship of Smt.	
I am therefore willing to work at night	shift for the period from to
period.	
Date:	
Place:	
	Signature/Thumb impression
-	of the Women worker.
Name, address, Signature of witnesse	es:
1,	
2	
4.	