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 (Des	ignation)	in M/s
		since I
am aware that, -		
the employer will provide safe	transport fac	ility 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 Committe	tee to prevent sexual harassment at work
place under the Chairmanship	of Smt	
I am therefore willing to work	at nightshift	for the period from to
period.		
Date:		
Place:		
		Signature/Thumb impression
-		of the Women worker.
Name, address, Signature of	witnesses:	
1		
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