

FORM- 1
(WIREMAN-MV)

EXPERIENCE CERTIFICATE FROM EMPLOYER
(In case of working under Electrical Contractor)

Date: _____

This is to certify that the applicant (name) _____
is/was working in this organization _____ as
_____. He / She is/was working under the supervision of our Electrical
Supervisor, Name: _____ and SCC No. _____ and the details of
works for which he/she is/was engaged is as mentioned below.

Sl. No.	Period of employment		Designation	Place of Posting	Brief description and nature of work clearly indicating voltage level
	From	To			

Supervisor Details (MV/HT/EHT)	Contractor Details (MV/HT)
Full Signature with date Short Signature Full Name: SCC No. Validity: Mobile No. Official Seal	Full Signature with date Short Signature Full Name : License No. Validity : Mobile No.: Official Seal

N.B: Submit individual forms for experience in each organization.