

**Form 3
(WIREMAN- MV)**

EXPERIENCE CERTIFICATE FROM EMPLOYER

(In case of working under Govt. of Odisha/ Govt. of Odisha Undertaking/Distribution Licensees)

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, Name: _____, Designation _____ and SCC No. _____ (if any) 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			

(Signature of Electrical Engineer with Date)

Full Name
Designation:
Mobile No. and OFFICIAL SEAL.

Signature of Higher Technical Officer with date (not below the rank of Executive Engineer /Manager)

Full Name
Designation:
Mobile No.
OFFICIAL SEAL

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