

<b>Document Title:</b> Electronic Signature – Authorization Form		<b>Effective Date:</b> 18-MAR-2024
<b>Document Number:</b> GVW-FRM-017	<b>Version:</b> 02	<b>Next Review Date:</b> FEB-2026

Note:

a) Provide user information requested below

b) Read and understand the User Certification Statement below and sign underneath the statement with electronic signature.

<b>Title</b>	Mr.
<b>Name (as per Offer letter)</b>	Thamilarasan P
<b>Department/Service</b>	Innovation and Growth
<b>Department Head</b>	Parthiban S
<b>Employee ID (GVW ID)</b>	02-404
<b>Date of Joining</b>	01-11-2025

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Electronic Signature Certification Statement:

*I Certify that the use of identification component in combination with my password will be used in GVW for placing electronic signature and that this electronic signature is equivalent to my Handwritten signature. I certify that I shall maintain my password in a secure manner, and I shall not share my password with any other individuals. I understand that the use of another individual's electronic signature is considered forgery even if the other individual authorizes such use.*

Certified by (sign with date)	
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Electronic Signature Authorization Approval:

I have verified the identity of the individual for whom access to electronic signature authorization within GVW has been requested. I certify that the individual possesses the authority and necessary training and education to use electronic signature capabilities within GVW and the functionality of the user group stated above.

Approved by IT (Sign with Date)	
Approved by QA (Sign with Date)	

\*\*\*END OF THE DOCUMENT\*\*\*