

FORM ER II

Occupational return to be submitted to the Local Employment Exchange once in two
years
(on a date to be specified by notification in the Official Gazette)

**(Vide the Employment Exchanges (Compulsory Notification of Vacancies)
Rules, 1960)**

Name and address of employer

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Nature of business

(Please describe what the

establishment makes or does its.....

Principal activity)

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1.Total number of persons on the pay rolls of the establishment on
(specified date)

2.Occupational classification of all employees as given in item I above.
(Please give below the number of employees in each occupation separately).

	Occupation	Number of Employees			
		Men	Women	Total	
	Use exact terms such as Engineer (Mechanical); Teacher (Domestic/Science); Officer on Special Duty				Please give as far as possible approximate number of vacancies in

