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)

Nar	me and address of employe	er							
Nat	ture of business	nat the							
(Ple	ease describe what the	•••••							
est	ablishment makes or does	its							
Prir	ncipal activity)	al activity)							
	1.Total number	of perso	ons on the	e pay roll	s of the establish	ment on			
(sp	ecified date)								
					s as given in item				
(Ple	ease give below the numbe	r of em	oloyees in	each occu	ipation separately).				
	Occupation	Numb	Number of Employees						
	Use exact terms such as	Men	Women	Total	Please give as	1			
	Engineer (Mechanical);				far as possible				

Teacher

(Domestic/Science);

Officer on Special Duty

approximate

vacancies in

number of

actuary; Assistant Director (Metalllurgist); Scientific Assistance (Chemist); Research Officer (Economist); Instructor (Carpenter); Supervisor (Tailor); Fitter (Internal Combustion Engineer); Inspector (Sanitary); Superintendent (Office); Apprentice (Electrician)		. 0		each occupation you are likely to fill during the next calendar year due to retirement, expansion or reorganisation
(1)	(2)	(3)	(4)	(5)
				1.6
1.57				
185				

Note: Total of column (4) under item 2 should correspond to the figure given against item 1.

Dated

Signature of Employer

То

Employment Exchange,