FORM ER II GCPP.—154-E/2—2,000 Cps. (40)—19-1-2015.

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 as its principal activity) .....

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

   (This figure should include every person whose wage or salary is paid by the Establishment.)

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

Serial Number	Occupation	Number of Employees			
	Use exact terms such as Engineer (Mechanical); Teacher (Domestic/Science); Officer on Special Duty Actuary; Assistant Director (Metallurgist); Scientific Assistance (Chemist); Research Officer (Economist); Instructor (Carpenter); Supervisor (Tailor); Fitter (Internal Combustion Engine.); Inspector (Sanitary); Superintendent (Office); Apprentice (Electrician).	Men	Women	Total	Please give as far as possible approximate number of vacancies in each occupation you are likely to fill during the next calendar year due to retirement, expansion or reorganisation.
(1)	(2)	(3)	(4)	(5)	(6)

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(1)	(2)	(3)	(4)	(5)	(6)
Total :					

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

Dated .....

To

The Employment Exchange,

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Signature of Employer