

**FORM DPER-1
(DISABLED PERSONS EMPLOYED RETURN)
(See Rule 30)**

Quarterly return to be submitted to the Special Employment Exchange for the Quarter ended-----

Nature and Address of the Employer :

Whether Head Office :

Branch Office :

Nature of business/principal activity :

1(a) EMPLOYMENT:

Total number of persons including working proprietors/ Partners/commission agents/contingent paid and Contractual workers, on the pay rolls of the Establishment: excluding part-time workers and apprentices. (The figures should include every person whose wage or salary is paid by the establishment)						
On the last working day of the Previous quarter				On the working day of the quarter under report		
	Orthopaedically Handicapped	Visually Handicapped	Hearing Handicapped	Orthopaedically Handicapped	Visually Handicapped	Hearing Handicapped
Men with Disability						
Women with Disability						
Total						

(b) Please indicate the main reasons for any increase or decrease in employment if the increase or decrease is more than 5% during the Quarter.

(P.T.O.)

2.VACANCIES:- Vacancies carrying total emoluments as per prevailing minimum wage per month and of over three months duration.

(a) Number of Vacancies occurred and notified during the quarter and the number filled during the quarter (Separate figures may be given for men with disability and women with disability).

Number of vacancies which come within the purview of the Act				
Occurred	Notified		Filled	Sources
	Local Special Employment	General Employment Exchange	(Describe the source from which filled)	Exchange
1	2	3	4	5

(b) Reasons for not notifying all vacancies occurred during the quarter under Report vide 2(a) above:

3. MANPOWER SHORTAGES:

Vacancies / Posts unfilled because of shortage of suitable applicant			
Name of the Occupation Designation of the Post	Number of unfilled vacancies / Posts Disability wise		
	Essential Qualification	Essential Experience	Experience not Neces
1	2	3	4

Please list any other occupation for which this establishment had recently any difficulty in obtaining suitable applicants.

Signature of Employer

To
The Assistant Director,
Special Employment Exchange for PH,
Gandhi Nagar, Pondicherry-9.

Note: This return relates to the quarter ending 31st March/30th June/30th September and 31st December and shall be rendered to the Special Employment Exchange within 30 days after the end of the quarter concerned.