## 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	
1.50	V 7
Nature of business	
(Please describe what the	
establishment makes or does its	5
Principal activity)	
	f_A

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

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)
- / 22/				
1.07/				
1.21				

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

Dated

Signature of Employer

То

Employment Exchange,