

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 the employer
 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.)

O c c u p a t i o n	Number of employees			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 Re-organisation.
	Men	Women	Total	
Use exact terms such as engineer (Mechanical); teacher (domestic Science); Officer on Special Duty (Actuary); Assistant Director (Metallurgist); Scientific Assistant(Chemist) ; Research Officer(Economist);Instructor (Carpentry); Supervisor(Tailor); Fitter (Internal combustion engine) Inspector(Sanitary); Superintendent(Office) Apprentice (Electrician)				
	1	2	3	4
				5
.....				
.....				

Total

Dated

Signature of employer

To

The Employment Exchange
 (Please fill in here the address of your local Employment Exchange)

Note:- Total of Column (4) under item 2 should correspond to the figure against item I.

1. Subs. By G.S.R. 450 dt March 7, 1963.
 2 Subs. by G.S.R 548 dl. 16.3.1968
 3 Subs. by G.S.R.1718 dt. 18.11.1976 (1976 CCL-III)
 4 Subs. By GSR No.236 dated 06.05.1982
 5 Subs. by G.S.R. 133 dt. 3.1.1985 (w.e.f. 2.2.1985)
 6 Subs. by G.S.R 634 dt. 27.7.1987 (1987 CCL-I11-780)