

FORM DPER –III
(See Rule 31)

1. Name and Address of the Employer :
2. Whether: - Head Office :
- Branch Office :
3. Nature of business/ principal activity :
4. Total number of persons on the pay roll of the establishment (This figure should include every person whose wage or salary is paid by the establishment).
5. Total number of the disabled persons (Disability wise) on the pay roll of the establishment (This figure should include every person with disability whose wage or salary is paid by the establishment).
6. (a) Occupational Classification of all employees as given in item 5 above (please give below the member of employees in each occupation separately).

Occupation	Number of Employees						Nature and Extent of Disability	Total
	Men with Disability			Women with Disability				
	Ortho	Visual	Hearing	Ortho.	Visual	Hearing		
1	2	3	4	5	6	7	8	9
Use exact terms Such as engineer (Mechanical); teacher (Domestic/Science); Officer-on-duty (actuary); Asst. Director (Metallurgist); Scientific Asst. (Chemist); Research Officer (Economist); Instructor (Carpenter); Supervisor (Tailor); Fitter (internal combustion engine); inspector (Sanitary); Supdt. (office); Apprentice (Electrician)								
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....

7. Vacancies: Vacancies carrying total emoluments as per prevailing minimum wage per month and of over the months duration.

(a) Number of vacancies occurred and notified during the quarter and the number filled during the quarter.

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
Total				

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

8. Man power Shortages:

Vacancies / post unfilled because of shortage of suitable applicants.

Name of the Occupation Designation of the Post	Number of unfilled vacancies / Posts		
	Essential Qualification	Essential Experience	Experience not necessary

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

Signature of Employer