

ANNEXURE E- ATTENDANCE REGISTER

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Mines Rules, 1955

FORM C

[See Rules 48(3) and 78]

Register of persons employed below ground during the week commencing *and ending* 19.....

Name of Mine Part or section of Mine
 Name of Owner Hours of Shift Begins A.M.
 Ends P.M.
 Ends A.M.
 Ends P.M.

Sl. No.	Name and surname of employee	Age and Sex	Class or kind of employment	Relay or Set No.	Serial No. from Form B Register	Time should be recorded against each entry														Total		Remarks
						—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	No. of days worked	No. of hours worked			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
						In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	Miners including loaders		Others
						Initials of Register Keeper																
						Weekly Abstract																
						Total No. of attendances.																
						Total No. of absentees.																

Mines Rules, 1955

FORM D

[See Rules 48(3) and 78]

Register of persons employed [above ground] in opencast working during the week commencing
and ending 19

Name of Mine Part or section of Mine A.M.
Name of Owner Hours of Shift Begins P.M.
Ends A.M.
P.M.

Sl. No.	Name and surname of employee	Age and Sex	Class or kind of employment	Relay or Set No.	Serial No. from Form B Register	Time should be recorded against each entry														Total		Remarks	
						—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	No. of days worked	No. of hours worked			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	
						In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	In	Out				
Initials of Register Keeper						Weekly Abstract				Miners including loaders				Women		Others							
						Total No. of attendances.																	
						Total No. of absentees.																	

Mines Rules, 1955

FORM E

[See Rules 48(3) and 78]

Register of persons employed above ground otherwise than in open cast working during the week commencing and ending 19

Name of Mine Part or section of Mine
 Name of Owner Hours of Shift Begins A.M.
 P.M.
 Ends A.M.
 P.M.

Sl. No.	Name and surname of employee	Age and Sex	Class or kind of employment	Relay or Set No.	Serial No. from Form B Register	Time should be recorded against each entry														Total		Remarks	
						—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	—day	No. of days worked	No. of hours worked			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	
						In	Out	In	Out	In	Out	In	Out	In	Out	In	Out	In	Out				
Initials of Register Keeper						Weekly Abstract														Men		Women	
						Total No. of attendances.																	
						Total No. of absentees.																	

**Building and Other Construction Workers (Regulation of
Employment and Conditions of Service) Central Rules, 1998**

FORM XVI

[See Rule 241(1)(a)]

Muster-Roll

Name and permanent address of the establishment

Name and address of establishment where building or other construction work is
carried on/is to be carried on

Nature of building or other construction work

Name and address of Employer

For the month of

Sl. No.	Name of the building worker	Father's/ Husband's name	Sex	Dates	Remarks
(1)	(2)	(3)	(4)	(5)	(6)

**The Contract Labour (Regulation and
Abolition) Central Rules, 1971**

FORM XVI

[See Rule 78(1)(a)(i)]

Muster Roll

Name and address of Contractor

.....

Name and address of establishment in/under which contract is carried on

.....

Name and address of Principal Employer

.....

Nature and location of work.

.....

For the month of.

Sl. No.	Name of workman	Father's/ Husband's name	Sex	Dates					Remarks
				1	2	3	4	5	

Inter-State Migrant Workmen (Regulation of Employment and Conditions of Service) Central Rules, 1980

FORM XVII

[See Rule 52(2)(a)]

Muster-roll

Name and Address of Contractor.

Nature and Location of work.

Name and Address of Establishment in/ under which migrant workmen are employed
.....

Name and Address of Principal Employer.

For the month of

Sl. No.	Name of migrant workman	Father's/ Husband's name	Sex	Dates					Remarks
				1	2	3	4	5	
1	2	3	4	5					6

The Maternity Benefit (Mines and Circus) Rules, 1963

FORM A

[See Rule 3]

Muster-roll

Name of Mine or Circus:

1. Serial Number.
2. Name of woman and her father's (or if married, husband's) name.
.....
3. Date of appointment.....
4. Nature of work.
5. Dates with month and year in which she is employed, laid off and not
employed.

Month	No. of days employed	No. of days laid off	No. of days not employed	Remarks
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6. Date on which the woman gives notice under Section 6.
7. Date of discharge/dismissal, if any.
8. Date of production of proof of pregnancy under Section 6.
9. Date of birth of child.
10. Date of production of proof of delivery/miscarriage/[Medical Termination of
Pregnancy/Tubectomy Operation/death].
11. Date of production of proof of illness referred to in Section 10.
12. Date with the amount of maternity benefit paid in advance of expected
delivery.

13. Date with the amount of subsequent payment of maternity benefit.
 14. Date with the amount of bonus, if paid, under Section 8.
 15. Date with the amount of wages paid on account of leave under Section 9.
 - 15-A. Date with the amount of wages paid on account of leave under Section 9-A.
 16. Date with the amount of wages paid on account of leave under Section 10 and period of the leave granted.
 17. Name of the person nominated by the woman under Section 6.
 18. If the woman dies, the date of her death, the name of the person to whom maternity benefit and/or other amount was paid, the amount thereof and the date of payment.
 19. If the woman dies and the child survives the name of the person to whom the amount of maternity benefit was paid on behalf of the child and the period for which it was paid.
 20. Signature of the employer of [the mine or circus] authenticating the entries in the muster-roll.
 21. Remarks column for the use of the Inspector.
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The Minimum Wages (Central) Rules, 1950

FORM V Muster Roll

[Rule 26(5)]

Name of Establishment.....					Place.....						
Serial No.	Name	Father's/ Husband's Name	Sex	Nature of work	For the period ending.....					Total attendance	Remarks
											
					1	2	3	4	5		
										Total attendance	

FORM IV

[See Rule 6]

Muster-Roll

Name of Establishment Name and address of employer
 Location
 Post Office Wage-period from to

FORM VI] PAYMENT OF WAGES (AIR TRANSPORT SERVICES) RULES, 1968 2999

Serial No.	Name of employed person	Designation	Father's/Husband's name
1	2	3	4
Daily attendance/No. of units worked		Total attendance/Total No. of Units worked	Remarks
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21	22 23 24 25 26 27 28 29 30 31		
5		6	7

Sales Promotion Employees (Conditions of Service) Rules, 1976

FORM E

[See Rule 23(d)]

Leave Account

Name of establishment			Place											
Name of the Sales Promotion employee			Date of joining service											
Period of duty		No. of days	Leave earned	Balance of leave carried over	Total leave due	Earned leave	Balance of earned leave	Leave on Medical Certificate		Other kinds of leave		Remarks		
From	To							Due	Availed	From	To		Availed	From
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

FORM 'F'
Leave Register
[See Rule 37(iii)]

Name of establishment.										Place.									
Name and designation of the working journalist.										Calendar year of service.									
Duty			Earned leave			Leave on medical certificate			Other kinds of leave			Remarks							
From	To	Balance	Due	Availed	Balance	Due	Availed	From	To	Balance	Due				Availed	From	To	Balance	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17			

Working Journalists (Conditions of Service) and Miscellaneous Provisions Rules, 1957

FORM 'G'
Muster-Roll
[See Rule 37(iv)]

Name of establishment.		Time at which work		Place.						
Sl. No.	Name of the working journalist	Designation	Commenced	Ceased	Rest interval	Working hours For the period ending 1.2.3.—31	Total hours worked in consecutive period of 4 weeks	Overtime hours worked for the period ending 1.2.3.—31	Rest hours allowed in lieu of the overtime hours worked as in Column 9—1.2.3.—31	Remarks
1	2	3	4	5	6	7	8	9	10	11