CIRCULAR

Subject: Seeking Public comments/suggestions(if any) on draft “Child and Adolescent Labour Survey Form” to be finalized as per Revised National Child Labour Project(NCLP) Scheme—regarding

As per request received from several states / district(s) regarding “Child and Adolescent Labour Survey Form” as per Revised National Child Labour Project(NCLP) Scheme, a draft “Child and Adolescent Labour Survey Form” has been devised keeping in mind basic minimum requirements and to facilitate conduct of survey. This would ensure uniformity in survey forms used by different Project Societies. The modalities for conducting survey is enumerated at para 4.2 to 4.7 of Revised NCLP Guidelines which may be seen at http://labour.nic.in/sites/default/files/RevisedNCLPguidelines01.04.2016.pdf

Suggestions / comments on the draft “Child and Adolescent Labour Survey Form” is solicited from the public and NCLP District Project Societies, in particular on or before 7th November, 2016. The specific suggestions / comments on the proposed data fields may be sent either by post or email (dk.bimanshu@nic.in, child.labour-mol@nic.in).

Postal address:
Deputy Secretary (Child Labour),
Room No. 301 A, Shram Shakti Bahwan,
Ministry of Labour and Employment,
Rafi Marg, New Delhi- 110001.

(Anita Tripathi)
Deputy Secretary to the Government of India
Tel: 011-23711354
Email: anita.tripathi76@nic.in
Child and Adolescent Labour Survey Form

State: .................. District:......................

Tehsil/ Subdivision: ................. Taluk / Block:..................

Town / Village:.................... Ward/ Mohalla:..................

Part A: Personal details of Child / Adolescent

Name of the Child: ................................................................

Nickname (if any): ................................................................

Age Type(Mark √): Actual □ Declared □

Date of Birth: ___________________ Current age: □ Age proof: □ Sex: M/F □

Aadhar Card: Yes □ No □ Ration Card: Yes □ No □

Religion: Hindu □ Muslim □ Sikh □ Other □

Category: GEN □ OBC □ SC □ ST □ Other □

Residential Address: ................................................................
(Including landmark)

permanent Address: ................................................................
(Including landmark)

Part B: Details of Child / Adolescent Occupations / Employment

Work Type: Self-employed □ Home based □

Establishment/Shop □

Name of Occupation / Employment: ...........................................

Name of the Employer and Address: ...........................................
Address of Working Place: 

Monthly Income / wage paid: 

Number of working Hours: 

**Part C: Details of child / adolescent educational status**

Education: illiterate [ ] School Drop-out [ ] Working & Studying [ ]

(Mark v)

If drop out, Previous class in which studied: 

If Working & Studying, currently enrolled in class: 

Name of educational institution: 

(School Drop-out / Working & Studying)

Reason for dropout: Poverty [ ] Parents sent for work [ ] Lack of interest in studies [ ]

Poor School environment [ ] Migration due to pressure [ ] Lack of facilities in the school [ ]

Vocational training attended, if any: Yes [ ] No [ ]

Type of Training: 

If Vocational training needed, which type of training is required: 

Any remarks/observations: 

**Part D: Details of child / adolescent Parents / Guardians**

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Name</th>
<th>Sex</th>
<th>Age</th>
<th>Occupation</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Father</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Mother</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>(3) Guardian</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The Parents of the Child are

Married [ ] Divorced [ ] Separated [ ] Widow/Widower [ ] Deceased [ ]

Other [ ]

I, __________________________________________, certify that my son/daughter __________________________________________ is enrolled but he is not going to School for study/Enrolled nowhere.

Signature/Thumb Print of Parent/Guardian: __________________________________________

Signature/Thumb Print of Child: __________________________________________

Comment of Surveyor/Field Investigator: __________________________________________

Name & Signature of Surveyor/Supervisor ________________________________ Name & Signature of Field Investigator ________________________________
Guidelines for filling survey Form:

1. Child below the age of 14 years are prohibited in any occupation or processes.
2. Adolescent (above 14 years and less than 18 years) are prohibited to work in scheduled occupation or processes as under:
   i. Mines
   ii. Inflammable substances or Explosives
   iii. Hazardous Processes (as per clause (eb) of the Factories Act 1948).
3. Name of the occupation / employment as per prevailing categorization made by the district.
4. Income of parent / guardian is on monthly basis.

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