FORM NO. 12

(Prescribed under Rule 87)

Register of adult workers

Serial No.	Name and residential address	Father's name	Nature of work	Letter of group as in Form 11	Number of relay if working in shifts	*No. and date of certificate if an adolescent*		Remarks
						Number of certificate and date	Token number giving reference to the certificate	
1	2	3	4	5	6	7	8	9