

FORM NO. 28

[Prescribed under Rule 115(3)]

ATTENDANCE CARD

Name of factory _____

Serial No. _____ Department _____

Name of work _____

Father's or Mother's name _____

Permanent address _____

Local address _____

Date of commencement of
employment

Signature or thumb impression
of worker.

*Date of termination of
Employment

*Note. – To be entered only when employment is terminated.

ENTRIES ON THE REVERSE SIDE

Month of _____ 19 _____

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	

(Signature or initials of the
Manager or Time Keeper)