

FORM APPRENTICESHIP - 2

Name & address of the establishment

Report for the half year ending

_____ (Name of the Manager/Director) _____

(Name & Designation of the Incharge

Officer of Trg.

Name of Industry _____

& Standard Industrial Classification Code No. _____

(Minor)

Telex & Telephone No.

Telegraphic Address

Name of product _____

Total number of workers _____

| Sl. no. | Designated Trade | Number of workers other than | Number of apprentices to be engaged | No. of apprentice under training | | | | Remarks/Reasons for shortfall if any |
|---------|------------------|------------------------------|-------------------------------------|----------------------------------|---------|----------|-------|--------------------------------------|
| | | | | Fresher | Fresher | Ex - ITI | Total | |
| | | | | under | under | | 1 | |

| | | | | | | | | |
|---|---|--------------------------|---|------------------|--------------|---|---|---|
| | | un skilled workers | | er Basic trg. | Shop trg. | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |

1.

2.

3.

4.

etc.

| | | |
|---|---|--|
| *Apprentices joined during half year | *Apprentices completed training during half year | *Apprentices whose contracts terminated during half year |
| 10 | 11 | 12 |

1.

2.

3.

4.

etc.

Number of apprentice under training

Arrangement of Related Instructions on

(i) Day Release Basis

(ii) Block Release Basis

(iii) Any other Basis

Total number of Apprentices

Scheduled Castes Apprentices

Scheduled Tribes Apprentices

Physically Handicapped Apprentices

Women Apprentices

Apprentices under column 5 above are undergoing Basic Apprentices under
column 8 above are undergoing

Training at _____ Related Instructions at own
establishments

(Name of the Basic Training Centre) in

trades at Sl. Nos

at ITI _____

in Trades at Sl. Nos. ____

Dated :

Signature of Employer
