

FORM No. 10

[See rules 61 and 80 (1)]

**Register of workers specially trained for work on or near machinery in motion**

1. Name of worker :
2. Serial number as in the register of adult workers :
3. Father's name :
4. Date of birth and age :
5. Nature of work :
6. Qualifications, if any, or period of service on similar work :
7. Date when tight fitting clothing was provided :
8. Remarks :

I certify that the above mentioned worker whose signature or left hand thumb impression is given below is a properly trained male adult worker who is competent to mount or ship belts, lubricate or do other adjusting operations on the machinery as specified in proviso to sub-section (1) of section 21, installed in my factory.

Signature or left hand thumb  
impression of worker

Signature of manager  
Name (in block letters)

Signature of occupier  
Name (in block letters)

Date: