

FORM 19
(See rule 116)

Notice of period of work for Adult Workers

Name of factory:
Address:
District:
First day of the week:

Registration number:
Licence number:
NIC Code number:
(As given in the licence)

Periods of work	Men												Women												Identification of the group*		Remarks
	Total number of men employed												Total number of women employed												Alphabet assigned A, B, C, etc.	Nature of work	
Groups	A			B			C			D			A			B			C			D					
Relays	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3			
On working days From..... to..... From to From to																									A B C		
On partial working days From..... to... From... to...																									D E		

* Date on which this notice is first exhibited: Describe the groups and explain the nature of work against identification letter marked A, B, C, D, E..... Rest interval for each shift should be indicated clearly.

Signature of manager
Name (in block letters)
Date: