

**FORM A**  
**FORMAT OF EMPLOYEE REGISTER**  
**[Part-A: For all Establishments]**

Name of the Establishment \_\_\_\_\_ Name of the Owner \_\_\_\_\_ LIN \_\_\_\_\_

Sl. No.	Employee Code	Name	Surname	Gender	Father's/Spouse Name	Date of Birth	Nationality	Education	Date of Joining
1	2	3	4	5	6	7	8	9	10

Designation	Category*	Type of Employment	Mobile	UAN	PAN	ESIC IP	LWF	Aadhar	Bank A/c #	Bank
11	12	13	14	15	16	17	18	19	20	21

IFSC	Present address	Permanent address	Service book no	Date of Exit	Reason for Exit	Mark of Identification	Photo	Sign	Remarks
22	23	24	25	26	27	28	29	30	31

Category\* = Highly Skilled/ Skilled/ Semi-Skilled/ Un-Skilled

**[Part-B : For the Mines Act, 1952 ONLY]**

Sl. No	Name	Token #	Date of Appointment	Certificate of Age & Fitness	Place of Employment (Underground/ Open Cast/ Surface)	Certificate of Vocational Training		Nominee	
						Number	Date	Name	Address
1	2	3	4	5	6	7	8	9	10

**FORM B**  
**FORMAT FOR WAGE REGISTER**

Name of the Establishment \_\_\_\_\_ Name of the Owner \_\_\_\_\_ LIN \_\_\_\_\_

Rate of Minimum Wage and since the date.....				
Particulars	Highly Skilled	Skilled	Semi Skilled	Un Skilled
Minimum Wage				
DA				
OT				

Wage period from \_\_\_\_\_ To \_\_\_\_\_

Sl. No	Name	Rate of Wage	No. Of days worked	OT hours worked	Basic	Special Basic	DA	OT Payments	HRA	Others*	Total
1	2	3	4	5	6	7	8	9	10	11	12

PF	ESIC	Society	TDS	Insurance	Others	Recoveries	Total	Net	Employer PF	Bank transaction ID	Date of payment	Remarks
13	14	15	16	17	18	19	20	21	22	23	24	25

\*In case of Mines Act Leave wages paid should be shown in the Others column and Specifically mentioned in remarks column also.

**FORM C  
FORMAT OF REGISTER OF LOAN/ RECOVERIES**

Name of the Establishment \_\_\_\_\_ LIN \_\_\_\_\_

Sl. No	Name	Recovery type (Damage/Loss/Fine/Advance/Loan)	Particulars	Date of damage/loss	Amount
1	2	3	4	5	6

Whether show cause issued*	Explanation head in presence of	Number of Instalments	First month/year	Last month/year	Date of Complete recovery	Remarks
7	8	9	10	11	12	13

\*Applicable only in case of damage/loss/fine

**FORM D  
FORMAT OF ATTENDANCE REGISTER**

Name of the Establishment \_\_\_\_\_ Name of the Owner \_\_\_\_\_ LIN \_\_\_\_\_

For the period From \_\_\_\_\_ To \_\_\_\_\_

Sl. No	Name	Relay# or set work	Place of work*	Date	IN	OUT	Summary No. of Days	Remarks	**Signature of register keeper
1	2	3	4	5	6	7	8	9	10

*#Relay and \*Place of work in case of Mines only (Underground/Open cast/ Surface)*

*In case an employee is not present the following to be entered: (R for Rest/L for Paid Leave/A for absent/O for Weekly Off/C for Establishment Closed)*

*For more details on the aforesaid notification visit at- <https://labour.gov.in/whatsnew/ease-compliance-maintain-registers-under-various-labour-laws-rules-2017>*