



Filled in Proforma should be returned to:

NATIONAL TECHNICAL MANPOWER INFORMATION SYSTEM
Nodal Centre at Board of Practical Training (ER)
Block-EA, Sector-I, Salt Lake City
Kolkata-700 064

(ESTABLISHMENT QUESTIONNAIRE)

Reference Year: 1st April _____ to 31st March _____

Schedule No _____

Tick relevant boxes by putting (√) marks and where boxes are not provided write in words or figures

IDENTIFICATION PARTICULARS:

1. Name and Address of the Establishment _____

District _____ Pin code State _____

Phone No. _____ Ext. if any: _____ Fax No. _____

Email _____ Website Address _____

2. Year of Establishment: _____

3. Address of the Registered Office, if any _____

District _____ Pincode State _____

Phone No. _____ Ext. if any: _____ Fax No. _____

Email _____ Website Address _____

4. Nature of Main Activity of the Establishment

- a) Primary Sector (Agriculture)
 - i) Processing/ Agriculture/ Natural Product []
 - ii) Warehousing & Logistics []
- b) Secondary Sector (Industry)
 - i) Manufacturing []
 - ii) Mining/Quarrying []
- c) Tertiary Sector (Services) []
- d) Description of Main Activity _____

5. Nature of Ownership

- a) Central Government []
- b) State Government []
- c) Urban Local Body []
- d) Rural Local Body []
- e) Private []
- f) Public Private Partnership []
- g) Others, please specify []

6a: Number of Shifts in operation:

Single [] Double [] Triple []

6b: Weekly hours of work _____

7a. If you have choice what would be your preferred mode of sourcing skills

(Pl ✓ mark against the most preferred mode)

Training & Placement Cell of Colleges	Direct Search	Search Through Third Parties	Employment Exchange	Statutory Public Services

7b. How are you recruiting at present:

(Pl write 1,2,3 etc as per order of preference)

Training & Placement Cell of Colleges	Direct Search	Search Through Third Parties	Employment Exchange	Statutory Public Services

8. Total manpower engaged in establishment

Sl.No.	Category	Total manpower Engaged		Directly Engaged		Engaged through third Party		Engaged for <180 days in a year	
		M	F	M	F	M	F	M	F
i)	Post-graduate (Tech.) Including Management, Pharmacy & HMCT								
ii)	Graduate (Tech.) Including Management, Pharmacy & HMCT								
	a) Apprentices								
	b) Non Apprentices								
iii)	Diploma (Tech.) Including Management, Pharmacy & HMCT								
	a) Apprentices								
	b) Non Apprentices								
iv)	ITI/Trade								
	a) Apprentices								
	b) Non Apprentices								
v)	All Others (Non-Technical)								
	a) Trainees								
	b) Non Trainees								

9. Among those working in your establishment other than Apprentices, please indicate the branch of engineering & technology for all

Branch (Discipline) of Engineering & Tech	Post Graduates		Graduates		Diploma holders		Total	
	Male	Female	Male	Female	Male	Female	Male	Female
Total								

(If the detail is exhaustive, pl provide the information in the tabular form as shown above on separate sheet & attach with this report)

10. Currently in which Branch do you have shortage of Manpower skills?

	Educational Level	Specialisation looking for
1	Post Graduate (Discipline-wise)	
	i) Computer Science	
	ii) Mechanical	
	iii) Civil	
	iv) Electronics	
2	Degree Holders (Discipline-wise)	
	i) Computer	
	ii) Mechanical	
	iii) Civil	
	iv) Electronics	
3	Diploma Holders (Discipline-wise)	
	i) Computer	
	ii) Mechanical	
	iii) Civil	
	iv) Electronics	
4.	ITI	
	For example:	
	Computer Science	Java
	Mechanical	Mechatronics
	Electronics	Robotics
	MBA	Finance

(Please attach additional sheets, if necessary)

11. Salary structure/gross emoluments (in Rs.)

Level	Minimum Gross Emoluments at Entry level	Average Gross Emoluments of experienced person	Apprentice
Post Graduate (Tech.) by Discipline			
Graduate (Tech.) by Discipline			
Diploma (Tech.) by Discipline			
ITI Holders			

(Please attach additional sheets, if necessary)

12. Do you have any in-house training programme for fresh entrants at the time of joining: Yes [] No []

If yes, how long is your training programme: _____

13. Name and designation of the person furnishing the information:

Name : _____ **Signature** : _____

Designation : _____ **Date:** _____