

FORM-XX

(See rule 76)

REGISTER FOR LEAVE WITH WAGES

Part I — Adults Part II — Adolescents

Establishment: _____

Department: _____

Name of worker: _____

Father's Name: _____

Sl. No.	Sl. No. in Register of Workers	Date of Entry into Service	Interruptions — Sickness/Accide nts	Interruptions — Authorised Leave	Interruptions — Lock Out/Legal Strike	Interruptions — Involuntary Unemployment	Interruptions — Others	Leave Due with Effect from	

Note: A separate page shall be allotted to each worker.

Signature of Employer/Register Keeper/Representative: _____