

GUJRAT GOVERNMENT GAZATTE, EX., 3-10-2019

Form-K

(See rule 12)

NOTICE OF WEEKLY HOLIDAY

Name and address of the establishment: _____

Name of the manager / authorized representative. : _____

All the workers in the establishment are hereby informed that the days of weekly holidays of

Each worker is given below:-

Sr No (1)	Name of Worker (2)	Designation (3)	Day of weekly Holidays (4)	Hours of work FromTo..... (5)
1.				
2.				
3.				

Date:

Place:

Signature of the manager or
Authorized representative.