

FORM NO. 15

Register of Adult Workers

Factory Name: Tech Solutions Pvt Ltd

Nature of Work: Software Development

Sl. No.	Name	Date of Birth	Sex	Residential Address	Father's/Husband's Name	Date of Appointment	Alphabet Assigned	No. of Relay	Certificate of Fitness	No. Under Section 68	Remarks
1	John	1990-05-12	Male	123 Street, City	Michael Doe	2020-06-15	A	2	CERT123456 2021-05-20	TOKEN123456	-

Signature of Employer: _____