

Form – 'R'
(See rule 27)
ANNUAL RETURN
(For the year ending 31st December 2018)

1	Name of the Establishment	WorldEmp India Private Limited		
2	Name of the Owner / Partner / Occupier / Director / Authorised Person	1. Frank Korf 2. Johannes Antonius Petrus Van Gestel 3. Madan Madhusudan Godse 4. Anil Chandra Vasu		
3	Name of the Manager	Anil Chandra Vasu		
4	Total number of Workers	MEN	WOMEN	
	Workers	11	6	
	Contract Labour	Nil	Nil	
	Causal	Nil	Nil	
	Part Time	Nil	Nil	
	Others(disabled employee)	Nil	Nil	
	Total	11	6	
5	Whether the notice showing the details of persons engaged in confidential, managerial, supervisory capacity is sent?	YES ✓	NO	
6	Nature of Business	Information Technology Software Services and Business		
7	Registration number Date of Validity of the Registration Certificate	10831000311926414 15-May-2021		
8	Number of shift Average number of persons engaged shift wise	1ST Nil	2ND Nil	3RD Nil
9	Whether notice of shift is displayed and copy sent to the Facilitator?	YES NA	NO NA	
10	Number of women workers engaged during the year (if applicable) Number of women workers engaged in night shift			6 N.A
11	Whether consent letter from women workers working in night shift is obtained? (if applicable)	YES	NO	N.A. ✓

Form – 'R'
(See rule 27)
ANNUAL RETURN

(For the year ending 31st December 2018)

12	Whether notice showing the weekly holiday of each worker is displayed?	YES ✓	NO	
13	Whether committee under the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (14 of 2013) is constituted ? (if applicable) Name of the Chairman of the Committee	YES ✓	NO	N.A. Ms. Tejas Sanghavi
14	Whether police verification of all the drivers and staff engaged in transportation of women workers is obtained ? (if applicable)	N.A.	NO	N.A. ✓
15	Is identity card issued to all workers?	YES ✓	NO	
16	Is leave book maintained?	YES ✓	NO	
17	Whether Committee for Health, Safety and Welfare is constituted? (if applicable)	YES	NO	N.A. ✓
18	Whether all safety measures as per the directions of fire officer / department of local authority or Fire Bridged or any such authority are observed?	YES ✓	NO	
19	Whether First aid box is maintained?	YES ✓		
20	Whether the following welfare facilities are provided (wherever applicable)			
	a) sufficient number of laterines and urinals	YES ✓	NO	
	b) Creche	N.A. ✓	NO	N.A.
	(c) Canteen	N.A. ✓	NO	N.A.
21	Whether all the records and registers are maintained and required notices are displayed.	YES ✓	NO	

Form – 'R'
(See rule 27)
ANNUAL RETURN

(For the year ending 31st December 2018)

22	Any application for compounding of an offence is made during the year ? if yes, Date of application Date of disposal Amount of fees deposited	N.A.	NO ✓
23	Number of accident occurred in the establishment during the year Number of workers injured Amount of compensation paid		NIL NIL NIL
24	Is the name board displayed in Marathi.	YES ✓	NO

Declaration

I, Mr.**Anil C. Vasu** hereby solemnly affirm that all the information mentioned in the annual return are true and correct. I /we am/are aware that if any information submitted by me turns out to be false or not true or incorrect, I shall be liable for legal action under the concerned Law.

Date: 25-Feb-2019
Place: Pune

Signature of Employer.