


FORM - I
[See Rule 17 (1)]

1.	Name of the Shop/Commercial Establishment	DELHI INSTITUTE OF ADVANCE STUDIES
2.	Postal Address of the Establishment	Sector-25, Rohini, New Delhi-110085.
3.	Full name and address of the Principal Employer (Furnish father's name in case of individual)	DELHI INSTITUTE OF ADVANCE STUDIES Sector-25, Rohini, New Delhi-110085.
4.	Full name and address of the Manager or person responsible for the supervision and control of the Establishment	Shri. S. K. Sachdeva, Chairman Delhi Institute of Advance Studies Sector-25, Rohini, New Delhi-110085.
5.	Nature of work carried on in the Establishment	Educational Institution
6.	Particulars of Contractors and Contract Labour	
(a)	Name and address of the Contractor	As per List Enclosed
(b)	Nature of work in which Contract Labour is employed	As per List Enclosed
(c)	Maximum No. of Contract Labour to be employed on any day through each contractor	As per List Enclosed
(d)	Estimated date of termination of employment of contract labour and under each contractor.	As per List Enclosed
7.	Particulars of treasury receipt enclosed (Name of treasury, amount and date).	

I hereby declare that the particulars given above are true to the best of my knowledge and belief.


Delhi Institute of Advanced Studies
CHAIRMAN Sector-25, Rohini, Delhi-110085
 Seal and Stamp
 Office of Registering Officer