

Subsidizing and Awarding Employers for Hiring Unemployed Workers Employment List (Serial Order of Application: __)

Name of Making Unit :

(Please use official seals of unit)

Employer who bear the responsibility :

(Signature)

Making Date : ____ (Year) ____ (Month) ____ (Day)

Serial Number					
Name					
Number of Identification C a r d					
Birth Date (year, month, d a y)					
Date of Place H i r i n g Registration					
Date of Joining L a b o r Insurance for Employment					
Work Hours Per Week					
Address of Household Registration and Contact Tele phone					
Whether Still in Employment (Date of Separation)					
Month of Application					
Remarks					

Totally from the above _____persons

Remarks : Please identify the status of employed workers(general unemployed, female household bread-earners, senior aged, disabled, aboriginal, family with living allowance, or ex-inmate)