# QUESTIONNAIR

| I) | PERSONAL DATA :                                   |
|----|---|
|    | a) Name :   |
|    | b) Sex : Male / Female                            |
|    | c) Caste :  |
|    | d) Age :  |
|    | e) Trade :  |
|    | f) Marital Status :                               |
|    | g) Education : Primary / Secondary / Higher       |
|    | Secondary / Technical / Under-                    |
|    | graduate / Graduate / Illiterate.                 |
|    | h) Period of service :                            |
|    | i) Native Place :                                 |
|    | j) Distance from place of work K.M.               |
|    | k) Mode of conveyance :                           |
|    | 1) On foot 2) By bicycle                          |
|    | 3) By Bus 4) By train                             |
|    | 1) From last how many seasons are you working?    |
|    | m) Department in which working presently?         |
|    | n) Whether seasonal permanent/seasonal/temporary? |
|    | o) Total salaries : Basic Rs.                     |
|    | D. A. Rs.   |
|    | Total Rs  |

#### II) FAMILY BACKGROUND :

- a) How many persons are there in your family?
- b) Land holdings:
  - 1) Total Land
  - 2) Irrigated
  - 3) Non-irrigated :
- c) Cropping pattern:
  - 1) Jawar
  - 2) Bajara :
  - 3) Wheat :
  - 4) Pulses :
  - 5) Sugarcane
  - 6) Cotton /

Others etc.

d) Whether food produced in farm is

sufficient for family for year

Yes / No

e) Do you have any other subsidiary

source or income?

Yes / No

#### III) WAGE STRUCTURE :

- a) How is the work rate in your factory?
  - 1) By piece rate
  - 2) By time rate
  - 3) By incentive plan

|     | b) Do you think that this is a               |          |
|-----|--|----------|
|     | good method                                  | Yes / No |
|     | c) Nature of Salary :                        |          |
|     | 1) Daily wages                               |          |
|     | 2) Weekly wages                              |          |
|     | 3) Monthly wages                             |          |
| IV) | WORKING CONDITIONS :                         |          |
|     | a) Are you satisfied with working conditions | ?        |
|     | 1) Temperature                               | Yes / No |
|     | 2) Air-movement                              | Yes / No |
|     | 3) Humidity                                  | Yes / No |
|     | 4) Illumination                              | Yes / No |
|     | 5) Sanitation                                | Yes / No |
|     | 6) Ventilation                               | Yes / No |
|     | b) For how many hours a day are you required |          |
|     | to work? hours.                              |          |
|     | c) Do you get all sanctioned holidays during |          |
|     | your employment?                             |          |
|     | 1) Weekly off                                |          |
|     | 2) Optional leave                            |          |
|     | 3) Sick leave                                |          |
|     | d) In which shift do you work?               |          |
|     | Is the working in that shift convenient      |          |
|     | to you?                                      |          |

functions / others.

e) i) Do you remain absent from work
without permission?

If yes how many times in a month?

ii) What is the cause of such an absence
sickness / accident / social and religious

## V) WELFARE FACILITIES :

a) Do you get the following Welfare Facilities
like permanent or regular employes?

| 1) | Washing & Bathing facilities | Yes / No |
|----|------------------------------|----------|
| 2) | Sitting facilities           | Yes / Yo |
| 3) | Canteen facilities           | Yes / Yo |
|    | Are you satisfied about      |          |
|    | cantsen                      | Yes / No |
| 4) | Rest-room facilities         | Yes / No |
| 5) | Medical facilities           | Yes / No |
|    | If not why ?                 |          |
|    | If yes are you paid any fees |          |
|    | for medical facilities       | Yes / No |
| 6) | Recreational facilities      | Yes / No |
| 7) | Educational facilities       | Yes / No |
| 8) | Grain shop and concessional  |          |
|    | rate sugar from factory      | Yes / No |
| 9) | Housing facilities           | Yes / No |
|    |                              |          |

If no why?

If yes state the house

- i) Bamboo mat house
- ii) Permanent type quarters
- 10) Do you get advantages of
  - i) Provident fund
  - ii) State Insurance
  - iii) Bonus
    - iv) Family pension

#### VI) TRADE UNION :

a) Do you have trade union?

Yes / No

b) Are you a member of it?

Yes / No

c) It is recognised?

Yes / No / Unknown

d) Was ever your complaint made up by trade union

Yes / No

e) Was it successful

Yes / No

## VII) OFF SEASON :

- a) What you do after discontinuation of service?
  - 1) Work at some other place
  - 2) Remain unemployed
  - 3) Work in agriculture
  - 4) Run any business
- b) Whether you get any salary during the period of discontinuation from factory? Yes / No If yes how much amount you get from factory?

|       | c) Wages are sufficient for the         |          |
|-------|---|----------|
|       | needs of your family                    | Yes / No |
|       | d) Do you have to borrow?               | Yes / No |
|       | 1) Friends                              |          |
|       | 2) Relatives                            |          |
|       | 3) Co-operative Credit Society          |          |
|       | 4) Bank                                 |          |
|       | 5) Money Lender/any other source        |          |
|       | e) Do you get any advance or loan from  |          |
|       | factory                                 | Yes / No |
|       | If yes, how much?                       |          |
| VIII) | Are you satisfied about recruitment     |          |
|       | method of factory?                      | Yes / No |
| IX)   | Do you get any promotion in your        |          |
|       | service?                                | Yes / Ne |
|       | If yes, how many times?                 |          |
| x)    | Are you transferred from one department |          |
| ,     | to other department in your employment  |          |
|       | period                                  | Yes / Ne |
| XI)   | Do you get any training for your        |          |
|       | service?                                | Yes / Ne |
|       | If yes, a) On the job training          |          |
|       | b) Off the job training                 |          |
|       | c) Induction training                   |          |
|       |   |          |

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# XII) PERSONAL OPINION OF WORKER :

- a) What is your opinion regarding your service?
- b) What is your opinion about factory administration?
- c) Do you have any problems about service?
- d) Do you have any suggestions?