

APPENDICES

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NENON PISTONS PVT LTD., KOLHAPUR.

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III. PHOTO COPIES OF NENON PISTONS PVT LTD.,
KOLHAPUR.

BIBLIOGRAPHY.

APPENDIX

INTERVIEW SCHEDULE

A STUDY IN WORKING CONDITIONS IN MESON PISTONS
PVT. LTD., KOHAPUR.

1. Name of the Researcher : Mr. BAHUBALI N. SABANNAWAR.
2. Name of the Researcher Guide :

PERSONAL DATA -

1. Name :
2. Age :
3. Sex :
4. Marital Status :
5. Native place : Village Taluka District.
6. What is the distance from your factory to living Place daily? : K.M.
7. How do you come to work place daily? : (a) By Bus.
(b) By Bicycle
(c) By motor cycle
(d) By foot.
8. In which Deptt. you are working? :
9. What is your designation? :
10. Type of work? : (a) Skilled
(b) Semi-skilled
(c) Un-skilled
11. :
11. Nature of work? : (a) Permanent
(b) Casual
(c) Probationary
(d) Seasonal
12. Experience in this company? :

WORKING CONDITIONS :

(I) CLEANLINESS :

1. Is your Deptt. swept every day? : Yes/No.
2. Are the machines kept cleaned ~~periodicly~~ periodically? : Yes/No.
3. Are your machines oiled after cleaning? : Yes/No.
4. Is there drainage facilities in your Deptt. ? : Yes/No.
5. Are they cleaned every week, if yes on which day ? : Yes/No.
a) on working day.
b) on weekly Holiday.
6. Are the roofs, belts, safety guards checked every week? : Yes/No.
7. Are the walls painted once in a year? : Yes/No.
If yes what type of colour used? :

(II) LIGHTING ARRANGEMENT :

1. Is there proper lighting arrangement made in your factory? : Yes/No.
If yes what type of arrangement is made? : a) Artificial
b) Natural
c) Both
2. Do you get sufficient lighting in your work place? : Yes/No.
3. Do you use special lighting for your machine? : Yes/No.
4. Are there glasses used for windows? : Yes/No.
If yes, whether they used for upward windows or down ward windows? : a) Up ward
b) Down ward
c) Both

(III) VENTILATION :

1. Do you get sufficient ventilation in your Deptt.? : Yes/No.
2. Do you get fresh air during your work period? : Yes/No.
3. Are there effective provisions made for your Deptt. for keeping suitable temperature? : Yes/No.
If yes, what type? a) Air cool machines
b) Fans
c) Natural
d) All are
4. Are there any method for outgoing bad ventilation from work place? : Yes/No.
If yes, what type? a) Fans
b) Open Windows
c) Both

(IV) DRINKING WATER FACILITY :

1. Does your company arrange drinking water facility in your department? : Yes/No.
2. Whether fresh water is provided every day? : Yes/No.
3. Do you get cool water facility in summer period? : Yes/No.
4. Whether drinking water facility is made at suitable place? : Yes/No.
5. Are there glasses provided for sucking the water? If yes what type? : Yes/No.
a) Steel
b) Aluminium
c) Plastic

(V) LATRINES AND URINALS :

1. Are there sufficient latrines provided by the company? : Yes/No.
2. Are there sufficient urinals provided by the company? : Yes/No.
If yes, separate arrangement is made for male and separate for female? : Yes/No.

3. Are the latrines cleaned : Yes/No.
every day?

4. Are the urinals cleaned : Yes/No.
every day?

5. After cleaning whether they:: Yes/No.
use phenol?

6. Is there sufficient lighting: Yes/No.
and ventilation provided in
latrines?

7. Is there sufficient lighting: Yes/No.
ventilation provided in
urinals.

If yes, what type : a) Artificial
b) Natural
c) Both

(VI) SPITTOON FACILITY :

1. Are there spittoon boxes : Yes/No.
provided in your company.

2. Is there spittoon box in your: Yes/No.
Deptt.?

3. Whether that is kept clean : Yes/No.
every day?

4. Have they kept spiton boxes:: Yes/No.
at one corner of the work
place?

5. Do you use spittoons boxes to: Yes/No.
Spit?

(VII) SHIFT SYSTEM :

1. Do you have shift system in : Yes/No.
your company? if yes, how
many shifts are there?

2. In which shift do you work? :

3. Do you get third shift : Yes/No.
allowance?

4. What is your opinion about : a) Good
b)Bad

5. If you have important : Yes/No.
personal work can you change
your shift? if yes, how
many days?



6. From whom you have to take :
permission?

(VIII) SAFETY MEASURES :

(1) SAFE GUARDS :

1. Whether all machines are kept: Yes/No.
with sufficient safe guards?
2. Are all safe guards kept : Yes/No.
with full nut bolts?
3. Are they being checked up : Yes/No.
periodically?
4. Whether machines are cleaned: Yes/No.
every week?

(2) GOGGLES :

1. Does your company provides : Yes/No.
goggles to everybody? if yes Yes/No.
do you using that?
2. Is that checked by medical : Yes/No.
officer?
3. Do you feel any bad effect : Yes/No.
of goggles?
4. Can you work properly witho-: Yes/No.
ut goggles?
5. Do you think goggles are to : Yes/No.
be provided to you?

(3) HAND GLOVES :

1. Whether your company provided: Yes/No.
hand golves to everybody.
2. Are they sufficient to your : Yes/No.
hands?
3. Can you work properly with- : Yes/No.
out hand gloves if yes, how,
if no why?
4. What are the uses of Hand :
glove s?
5. How many days you are using :
one pair of hand gloves ?

(4) SHOES :

1. Does your company provides shoes? If yes for whom? : Yes/No.
2. Are they well prepared? : Yes/No.
3. Why shoes are necessary ? :
4. Without shoes can you work : Yes/No.
If yes, how?
If no, why?
5. How many months you use one pair of shoes? :

(5) DRESS :

1. Does your company provide company uniform? : Yes/No.
If yes how many pairs for one year.
2. Do you get washing allowance: If yes how much? : Yes/No.
3. Do you clean your dress every week? : Yes/No.

WELFARE FACILITY :

(I) WASHING FACILITY -

1. Is your company provides wash Basin? If yes, are they sufficient? : Yes/No.
Yes/No.
2. Whether wash basins are kept clean with sanitary tiles? : Yes/No.
If yes, are those cleaned every day? : Yes/No.
3. Whether sufficient water provided for washing your hands? : Yes/No.
4. Are you using wash basins for washing your hands? : Yes/No.

(II) REST ROOM:

(II) REST ROOM :

1. Is your company provides rest: room to you? Yes/No.
2. Do you have sufficient sitting: arrangement made for you meals? If yes, are they cleaned every day? Yes/No.
3. Whether blankets are provided : if your rest rooms? If yes are they separate or common to every body? Yes/No.
4. Are they washed blankets? : Yes/No.

(III) FIRST AID BOXES :

1. Is your company provides : First-Aid boxes? Yes/No.
2. If yes, whether those are : separate to every deptt.? Yes/No.
2. Whether all First-aid boxes : are kept with full and necessary medical equipments? Yes/No.
3. Whether first aid boxes are : kept at suitable places? Yes/No.
4. Is your company give any : information both the First-Aid Box? Yes/No.

(IV) CANTEEN FACILITY :

1. Is your company provides : canteen facility? Yes/No.
If yes, how its services are?
2. Do you get tea and snacks on : your work place? Yes/No.
3. Do you get good food and : snack from your canteen, If yes at what rate. Yes/No.
4. Is your canteen cleaned every: day. Yes/No.

(V) MEDICAL FACILITY:

1. Is your company provides free : Yes/No.
medical service, if yes, for
you only or to your whole family: a) for self
b) for whole family.
- 2) Are you satisfied with your :: Yes/No.
medical services?
- 3) Are you being examined once : Yes/No.
in a year through your company
4) medical officer.
- If yes, is there any problem? : Yes/No.
If yes, what is that?
- 4) Do you get any help from your : Yes/No.
company?
- 5) Is there any company medical : Yes/No.
officer?
- If yes, are you going there : Yes/No.
only-if yes why?

(VI) ANNUAL LEAVES LEAVE WITH WAGES :

1. Does your company provide : Yes/No.
leave with wages? If yes,
what are those?
2. How much leaves you get in a : Yes/No.
year?
3. What are those? :
4. What is the procedure of :
calculating the earned leave?
5. Are you allowed to encash of : Yes/No.
your leaves?
6. Does your absenteeism affect : Yes/No.
your E.L.
7. Can you take leave after your : Yes/No.
all leave?
- If yes, how many days and what :
type of leave.

(VII) WAGE :

1. How your work is rated :
Do you feel, that this is good? : Yes/No.
If yes, how?
2. How much wage/salary do you get :
in a month?
3. Are there any deduction from your :
monthly wage/salary? : Yes/No.
If yes, what are these (given below):
 - a) Recovery of Society Loan.
 - b) Recovery of Advance.
 - c) Absence from duty.
 - d) LIC Instalment.
 - e) P.F.
 - f) PPF.
 - g) Canteen deduction.
 - h) Any other.
4. Are you satisfied with your :
wage/salary? If no what will you : Yes/No.
do in Managing the expenses.

(VIII) BONUS :

1. Do you get yearly bonus? : Yes/No.
2. If yes, at, what Rate ? :
How do you spend the bonus amount?:
 - a) For repaying the loan
 - b) For Daily Expenses.
 - c) For domestic work.
 - d) Savings.

(IX) ALLOWANCES :

(A) OVER TIME :

1. Are you allowed for over time : Yes/No.
work? If yes, how much time? and why?
2. Do you get over time if, yes at what rate
what rate ? : Yes/No.
3. Do you have any other special : Yes/No.
allowance? If yes, what are those :
4. Do you get all allowance as per : Yes/No.
factory Act, 1948. Is yes what are
those ?

- a) Dearness allowance.
- b) Conveyance Allowance.
- c) Canteen Allowance.
- d) H.R.A.
- e) Washing Allowance.
- f) Night shift allowance.
- g) Any other.

(X) ABOUT TRADE UNIONS :

1. How many trade Unions are :
there in your Factory ?
2. What are/is the name of your :
Trade Union ?
3. What is the strength of your :
Trade Union ?
4. What is the fee to be paid for:
being a member of the Union ?
5. What are the benefits of Trade:
Union ?
6. How are the relationship :
between T.U.& Management ?

(XI) GENERAL :

1. Is there any disciplinary :
measures in your company . If :
yes, what are those(given below) Yes/No.
 - a) Oral Warning.
 - b) Written Warning.
 - c) Transfer.
 - d) Show-Cause.
 - e) Charge-Sheet.
 - f) Any Other.
2. What is your opinion about :
working conditions in your
factory?
3. What is your view about your :
Company.

PLACE :

DATE :

Date:-

(ii) : GENERAL NOTICE:

You ~~we~~ have been chargesheeted for habitual absenteeism vide our Charge Sheet No. ----- dated----- and the enquiry into the matter of the Charges of habitual absenteeism is in process.

You have represented your case through your application and written explanation dated----- and that you have accepted the charges. You have further requested that you have accepted the Charges. You have further requested that you may be given one more opportunity for improvement in attendance and that you will be regular in attendance and will not remain absent without prior sanction of leave, in future. The Union Representative have also assured that they have advised you to be regular in your attendance, in future.

In view of the request made and assurance given by you, we have considered your cases sympathetically and have decided to give you one more Opportunity to improve your attendance.