

STATUS MONITORING GUIDELINES

2009/2010 BLES Integrated Survey

2010 Occupational Wages Survey

1. Open the Microsoft Access to view the contents of the SELECTION MENU.
2. Click appropriate button to go to the selected report/form

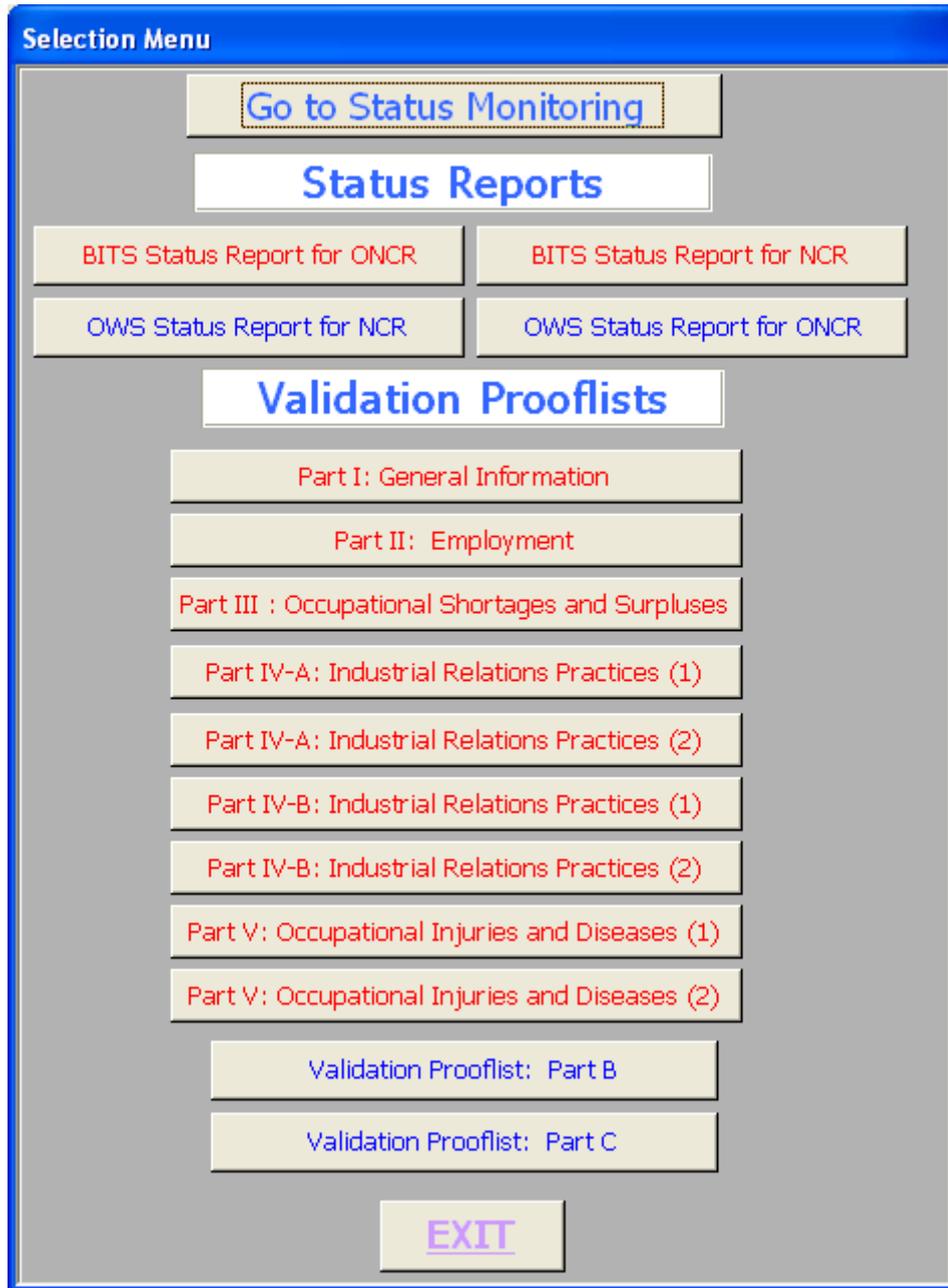


Figure 1. Selection Menu.

For example, if you click this button



The Status Monitoring Screen will appear.

A. STATUS MONITORING SCREEN

ESTABLISHMENT DATA

Bureau of Labor and Employment Statistics

2009/2010 BITS and OWS Survey

Status Monitoring

[Main Menu](#)

for BITS Only

[Go to Part 1](#) [Go to Part 5](#)

for OWS Only

[Go to Basic Pay](#)

Business Name: ILOCOS NORTE ELECTRIC COOP INC

New Name of Establishment: _____

Address 1: NATLRD

New Address 1: _____

EIN: _____

Geographic Code: _____ 01 2809 030

HEAD OFFICE PARTICULARS (if Questionnaire is endorsed to Head Office)

Business Name: _____

Contact Person: _____ Tel. No.: _____

Position of Contact Person: _____

Head Office Address 1: _____

Geocode of Head office: _____ HO_indicator: _____

[Batch No. for BITS](#) _____

[Batch No. for OWS](#) _____

GENERAL INFORMATION

BITS

June 2008 CY 2007

Status Code: _____

DUP of EIN: _____

CET with EIN: _____

CON with EIN: _____

OSP w/ PSIC: _____

OTH (specify): _____

Industry Code: _____ E40100

Total Employment: _____ 386

Main Economic Activity: ELECTRIC DISTRIBUTION

Major Products/Goods or Services: ELECTRICITY

OWS

Status Code: _____

DUP of EIN: _____

CET with EIN: _____

CON with EIN: _____

OSP w/ PSIC: _____

OTH (specify): _____

Industry Code: _____ E40100

Total Employment: _____

386	Time-rate on Full-time Basis	Time-Rate on Part-time Basis	Output Rate Workers	Working Owners and Unpaid Workers	TOTAL
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Main Economic Activity: ELECTRIC DISTRIBUTION

Major Products/Goods or Services: ELECTRICITY

PART D: CERTIFICATION PORTION

Contact Person: _____

Position Title: _____ Phone Number: _____

E-mail Address: _____ Fax Number: _____

Contact Person: _____

Position Title: _____ Phone Number: _____

E-mail Address: _____ Fax Number: _____

COMMENTS

Time spent in answering this questionnaire: _____

Comment on data provided: _____

Employment: _____

Wage and Compensation: _____

Occupational Injuries: _____

Labor Cost of Employees: _____

[Presentation /Packaging](#) [Suggestions for improvement](#)

Definition of terms: _____

Layout: _____

Font, color: _____

Time spent in answering this questionnaire: _____

Comment on data provided: _____

Comment on results: _____

[Presentation /Packaging](#) [Suggestions for improvement](#)

Definition of terms: _____

Layout: _____

Font, color: _____

Participation in Other Government Surveys

In 2006, have you been a recipient of a questionnaire in any of these surveys? (check as applicable)

Annual Survey of Philippine Business and Industry

Quarterly Survey of Philippine Business and Industry

Labor Turnover Survey

Others _____

PART E: SURVEY PERSONNEL

	Enumerator	Area Supervisor	Reviewer-BITS	Reviewer-OWS
Name	_____	REGION I	_____	_____
Date	_____	_____	_____	_____

Figure 2. Status Monitoring Screen.

The status monitoring for the 2007/2008 BLES Surveys already includes both BITS and OWS Buttons for the two surveys which are located on top of the screen (BITS – left corner; OWS-right corner).

STATUS MONITORING GUIDELINES (see Figure 2)

1. EIN	Press CTRL+F to find the desired EIN
2. New Name	See Guidelines on Establishments Naming and Addressing.
3. New Address 1	
4. New GeoCode	Type the corresponding entry for each item as reflected in the questionnaire
5. Head Office Particulars	
<i>Business Name of Establishment</i>	
<i>Contact Person</i>	
<i>Position of Contact person</i>	
<i>Telephone Number</i>	
<i>Head Office Address 1</i>	
<i>Geocode of Head Office</i>	Select from the list.
<i>Head Office Indicator</i>	
6. Batch Number for BITS and OWS	See Batch Label For Retrieved questionnaires NCRx-Rn where x - Reviewer Code ONCRx-Rn n - Sequence no. from 1 to n For Spoilage questionnaires NCRx-Sn where x - Reviewer Code ONCRx-Sn n - Sequence no. from 1 to n
7. Status Code for BITS and OWS	Select from the List
DUP	Enter EIN for DUP, CET, CON
CET	
CON	Enter Industry Code Specify reason
OSP	
OTH	
7a. Remarks	Enter as applicable
FOR BITS ONLY	Type the corresponding entry for each item as reflected in the questionnaire.
<i>Main Economic Activity</i>	
<i>Major products / goods or services</i>	
<i>New Industry Code</i>	
<i>New Total Employment</i>	Type the corresponding entry for each item as reflected in the questionnaire.
FOR OWS ONLY	
<i>Main Economic Activity</i>	
<i>Major products / goods or services</i>	
<i>New Industry Code</i>	
<i>Time-rate on Full-time Basis</i>	
<i>Time-rate on Part-time Basis</i>	
<i>Output Rate Workers</i>	Entry should be equal to Time-rate on Full-time Basis + Part-time+Output Rate+Working Owners and Unpaid Workers
<i>Working Owners and Unpaid Workers</i>	
<i>Total</i>	

STATUS MONITORING GUIDELINES (continued)

8. Certification Portion for BITS & OWS	
<i>Name of Contact Person</i>	Type the corresponding entry for each item as reflected in the questionnaire.
<i>Position Title</i>	
<i>Telephone Number</i>	
<i>Fax Number</i>	
<i>E-mail address</i>	
<i>Time spent in answering the questionnaire</i>	Select from the List Less than a day 1-2 days More than 2 days
<i>If more than 2 days specify</i>	Type the corresponding entry for each item as reflected in the questionnaire.
Comments on BITS	
<i>On the data provided for the 2007/2008 BITS</i>	Type the corresponding entry for each item as reflected in the questionnaire.
<i>On statistics from previous BITS</i>	
<ul style="list-style-type: none"> • <i>Employment</i> • <i>Wage and Compensation Practices</i> • <i>Occupational Injuries</i> • <i>Labor Cost of Employees</i> 	Type the corresponding entry for each item as reflected in the questionnaire.
Comments on OWS	
<i>On the data provided for the 2008 OWS</i>	Type the corresponding entry for each item as reflected in the questionnaire.
<i>On results of the 2006 OWS</i>	
Presentation/Packaging for BITS and OWS	
Definition of terms	Select from the list
Layout	
Font, color	
Suggestions for improvement	Type the corresponding entry for each item as reflected in the questionnaire.
Participation in Other Government Survey (OWS only)	Check as applicable
If Others is checked	Type the corresponding entry for each item as reflected in the questionnaire.
9. Survey Personnel for BITS and OWS	
Enumerator	Type the corresponding entry for each item as reflected in the questionnaire.
Date	
Area Supervisor	
Date	
Reviewer	
Date	

DATA ENTRY GUIDELINES

- A. 2009/2010 BLES Integrated Survey
- B. 2010 Occupational Wages Survey

B. OCCUPATIONAL WAGES SURVEY

BUREAU OF LABOR AND EMPLOYMENT STATISTICS
2010 OCCUPATIONAL WAGES SURVEY
FORM BASIC PAY

[Go To ALLOWANCES](#)

EIN: BATCH NO.

**PART B: EMPLOYMENT AND WAGE RATES OF TIME RATE WORKERS
ON FULL-TIME BASIS**

Hourly Rate		Daily Rate		Monthly Rate	
Basic Pay	Full-time Workers	Basic Pay	Full-time Workers	Basic Pay	Full-time Workers
Below 14.38		Below 115.00		Below 3,000	
14.38 - 19.16		115.00 - 153.33		3,000 - 3,999	
19.17 - 23.95		153.34 - 191.67		4,000 - 4,999	
23.96 - 28.75		191.68 - 230.01		5,000 - 5,999	
28.76 - 33.54		230.02 - 268.35		6,000 - 6,999	
33.55 - 38.33		268.36 - 306.69		7,000 - 7,999	
38.34 - 43.12		306.70 - 345.02		8,000 - 8,999	
43.13 - 47.92		345.03 - 383.36		9,000 - 9,999	
47.93 - 52.71		383.37 - 421.70		10,000 - 10,999	
52.72 - 57.50		421.71 - 460.04		11,000 - 11,999	
57.51 - 62.29		460.05 - 498.38		12,000 - 12,999	
62.30 - 67.08		498.39 - 536.72		13,000 - 13,999	
67.09 - 71.87		536.73 - 575.06		14,000 - 14,999	
71.88 - 76.66		575.07 - 613.40		15,000 - 15,999	
76.67 - 81.45		613.41 - 651.74		16,000 - 16,999	
81.46 - 86.24		651.75 - 690.08		17,000 - 17,999	
86.25 - 91.03		690.09 - 728.42		18,000 - 18,999	
91.04 - 95.82		728.43 - 766.76		19,000 - 19,999	
95.83 - 100.61		766.77 - 805.10		20,000 - 20,999	
100.62 - 105.40		805.11 - 843.44		21,000 - 21,999	
105.41 - 110.19		843.45 - 881.78		22,000 - 22,999	
110.20 - 114.98		881.79 - 920.12		23,000 - 23,999	
114.99 - 119.77		920.13 - 958.46		24,000 - 24,999	
119.78 and over		958.47 and over		25,000 and over	
Sub-total		Sub-total		Sub-total	
				TOTAL	

Figure 3. PART B - Screen Layout (Basic Pay)

PART B: EMPLOYMENT AND WAGE RATES OF TIME RATE WORKERS ON FULL TIME BASIS (Basic Pay)	Type the corresponding entry for each item as reflected in the questionnaire
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[Go To ALLOWANCES](#)

Open Figure 4. Part B – Screen Layout (Allowances)

[Go To PART C](#)

Open Figure 5. Part C – Screen Layout

BUREAU OF LABOR AND EMPLOYMENT STATISTICS
2010 OCCUPATIONAL WAGES SURVEY
FORM ALLOWANCES

[Go To PART C](#)

EIN: BATCH NO:

Of the TOTAL reported in Basic Pay, how many received allowances?

**PART B: EMPLOYMENT AND WAGE RATES OF TIME RATE WORKERS
ON FULL-TIME BASIS**

Hourly Rate		Daily Rate		Monthly Rate	
Allowances	Full-time Workers	Allowances	Full-time Workers	Allowances	Full-time Workers
Below 1.20		Below 9.58		Below 250	
1.20 - 2.39		9.58 - 19.15		250 - 499	
2.40 - 3.59		19.16 - 28.73		500 - 749	
3.60 - 4.78		28.74 - 38.31		750 - 999	
4.79 - 5.98		38.32 - 47.90		1,000 - 1,249	
5.99 - 7.18		47.91 - 57.48		1,250 - 1,499	
7.19 - 8.38		57.49 - 67.07		1,500 - 1,749	
8.39 - 9.58		67.08 - 76.65		1,750 - 1,999	
9.59 - 10.78		76.66 - 86.24		2,000 - 2,249	
10.79 - 11.97		86.25 - 95.82		2,250 - 2,499	
11.98 - 13.17		95.83 - 105.41		2,500 - 2,749	
13.18 - 14.37		105.42 - 114.99		2,750 - 2,999	
14.38 - 15.57		115.00 - 124.57		3,000 - 3,249	
15.58 - 16.77		124.58 - 134.15		3,250 - 3,499	
16.78 - 17.97		134.16 - 143.73		3,500 - 3,749	
17.98 - 19.17		143.74 - 153.31		3,750 - 3,999	
19.18 - 20.37		153.32 - 162.89		4,000 - 4,249	
20.38 - 21.57		162.90 - 172.47		4,250 - 4,499	
21.58 - 22.77		172.48 - 182.05		4,500 - 4,749	
22.78 - 23.97		182.06 - 191.63		4,750 - 4,999	
23.98 and over		191.64 and over		5,000 and over	
Sub-Total		Sub-Total		Sub-total	
				Total	

Figure 4. PART B - Screen Layout (Allowances)

<p>PART B: EMPLOYMENT AND WAGE RATES OF TIME RATE WORKERS ON FULL TIME BASIS (Allowances)</p>	<p>Type the corresponding entry for each item as reflected in the questionnaire</p>
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[Go To PART C](#)

Open Figure 5. Part C – Screen Layout

DATA ENTRY GUIDELINES

2009/2010 BLES Integrated Survey

PART I: GENERAL INFORMATION

Reference Date: June 30, 2010

BITS Part1: General Information

Part 1: GENERAL INFORMATION

Go to Parts 2 and 3

EIN: _____
Batch No.: _____

2. Ownership	<input type="text"/>
3. Type of Market	<input type="text"/>
4. With Union <small>(Registered or under process as of reference date)</small>	<input type="text"/>
4.1. If yes, please specify scope of bargaining unit	<input type="checkbox"/> Supervisors only <input type="checkbox"/> Rank and File only <input type="checkbox"/> Rank and File including Supervisors
5. Number of Unions <small>(Registered or under process as of reference date)</small>	<input type="text"/> <input type="text"/> <input type="text"/>
6. Union membership	<input type="text"/> <input type="text"/> <input type="text"/>
6.1 Female Members	<input type="text"/> <input type="text"/> <input type="text"/>
6.2 Union officers including members of the Board	<input type="text"/> <input type="text"/> <input type="text"/>

For Manufacturing Establishment Only

9. Is your establishment part of a global production network (GPN)?

If Yes, Please indicate:

1. specific product (e.g., integrated circuit, wiring harness, wearing apparel)

2. parent country, if any:

3. partner country/ies:

Item of Inquiry	Acceptable Entry
2. Ownership	<ul style="list-style-type: none"> There should only be one answer. Type "1" if Wholly Filipino. Type "2" if Wholly Foreign. Type "3" if With Foreign Equity.
3. Type of Market	<ul style="list-style-type: none"> There should only be one answer. Type "1" if Domestic Market Only. Type "2" if Export Market Only. Type "3" if Both Domestic and Export markets. If the answer is "3", there should be an entry in "___% export market". The entry should be greater than "0".
4. With union	<ul style="list-style-type: none"> There should only be one answer. Type "1" if YES or "2" if NO. If the answer is YES, there should be an answer in item no. 4.1. <p style="font-size: small; margin-top: 10px;">If the answer is NO and the establishment is engaged in manufacturing, proceed to item no. 9. There should be no entries in item nos. 4.1. to 8.1.</p>

PART I: GENERAL INFORMATION
(continued)

Item of Inquiry	Acceptable Entry
4.1. If yes, please specify scope of bargaining unit.	<ul style="list-style-type: none"> Type "1" if SUPERVISORS ONLY or "2" if RANK AND FILE ONLY or "3" if RANK AND FILE INCLUDING SUPERVISORS.
5. Number of unions	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. The entry should be greater than "0".
6. Union membership	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. Entry should be greater than "0" if there is an entry in item no. 5. Entry should not exceed or be equal to the figure provided in Part II item no. 1.
6.1. Female members	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. Entry should not exceed the figure provided in item no. 6. Entry may be equal to or less than the figure provided in Part II: item no. 2.2.
6.2. Union officers including members of the Board	<ul style="list-style-type: none"> There should be an entry if there is an answer in item no. 6. Type the numeric entry provided in the questionnaire. Entry should not exceed the figure provided in item no. 6.
6.2.1. Female officers	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. Entry should not exceed the figure provided in item no. 6.1.
6.2.1.1. Female presidents	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. Entry should not exceed the figure provided in item no. 6.2.1.
7. With collective bargaining agreements	<ul style="list-style-type: none"> Type "1" if YES or "2" if NO. There can be entry here if there is entry in item 4. If the answer is YES, item 7 must have an entry. If the answer is No, go to item 8 for manufacturing establishments or item 9 for BPO. Otherwise, go to Part II.

PART I: GENERAL INFORMATION
(continued)

Item of Inquiry	Acceptable Entry
8. Workers covered by CBAs including those paying agency fee	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be greater than "0" if the answer in item no. 6 is YES. • Entry may exceed the figure provided in item no. 5 if there are workers covered by CBAs, but are not union members.
8.1. Female workers covered	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should not exceed the figure provided in item no. 8. • Entry may exceed the figure provided in item no. 6.1. if there are female workers covered by CBAs, but are not union members. • Entry may be equal to or less than the figure provided in Part II: item no. 2.2.
9. Is your establishment part of a global production network (GPN)	<ul style="list-style-type: none"> • Type "1" if YES or "2" if NO. • If the answer is YES, the items on specific product, parent country/ies, if any; and partner country/ies should have entries. • If the answer is NO, proceed to Part II: Employment.

2009/2010 BLES INTEGRATED SURVEY PARTS II AND III

EIN : Batch No.: Go to Part 4a (1)

PART II: EMPLOYMENT

Item of Inquiry	Number of workers	3. Engaged in outsourcing or sub-contracting? <input type="text"/>
1. Total Employment		<input type="text"/> % of production process
1.1. Working owners		<i>Code: 1 - Yes, and specify % of production process</i>
1.2. Unpaid Workers		<i>2 - No, go to Part III</i>
1.3. Employees		
1.3.1. Managers/Executives		
1.3.1.1. Female managers/executives		
1.3.2. Supervisors/Foremen		
1.3.2.1. Female supervisors		
1.3.3. Rank and File Workers		
1.3.3.1. Regular Workers		
1.3.3.2. Non-Regular Workers		
2. Employment of Specific Groups of Employees <i>(as applicable, workers may be reported in several categories)</i>		
2.1. Young workers		
2.2. Female workers		
2.3. Time-rated workers		
2.3.1. Full-time workers		
2.3.1.1. Hourly		
2.3.1.2. Daily		
2.3.1.3. Monthly		
2.3.2. Part-time workers		
2.4. Commission workers		
2.4.1. With basic pay and commission		
2.4.2. Purely on commission with employer control		
2.4.3. Purely on commission without employer control		
2.5. Output-rated workers		
2.5.1. Piece-rated workers		
2.5.2. Production standard (quota) workers		
2.5.3. "Pakyao" or "Takay" workers		
2.5.4. Task workers		
2.6. Non-regular workers		
2.6.1. Probationary workers		
2.6.2. Casual workers		
2.6.3. Contractual/project based workers <i>(except agency-hired workers)</i>		
2.6.4. Seasonal workers		
2.6.5. Apprentices/learners		
2.6.5.1. Persons enrolled in (SPES) and (YEVE)		
		3.1. Job, work or service done WITHIN the premises of the establishment
		Type of process Outsourced/Jobs Contracted Out
		Number of workers
		Hired through employment agency Hired through workers cooperative
		3.1.1. Total
		3.1.1.1. Security services
		3.1.1.2. Janitorial
		3.1.1.3. General administrative
		3.1.1.4. Marketing/Sales
		3.1.1.5. Packaging
		3.1.1.6. Production/assembly
		<i>Specify:</i> <input type="text"/>
		3.1.1.7. Research and development
		3.1.1.8. IT services
		3.1.1.9. Others
		<i>Specify:</i> <input type="text"/>
		3.2. Job, work or service done OUTSIDE the premises of the establishment
		Type of Process Outsourced/Jobs Contracted out
		<i>Code: 1 - for Checked mark</i>
		3.2.1. Production/Assembly <input type="text"/>
		<i>Specify:</i> <input type="text"/>
		3.2.2. Finance/Accounting
		3.2.3. Data processing/encoding
		3.2.4. Human resource (HR)
		3.2.5. Learning/training
		3.2.6. Billing and Payment
		3.2.7. Transport services
		3.2.8. Courier services
		3.2.9. Packaging/crating
		3.2.10. Research and development
		3.2.11. Others
		<i>Specify:</i> <input type="text"/>

PART III: OCCUPATIONAL SHORTAGES AND SURPLUSES

1. Were there job vacancies in your establishment from January 2009 to June 2010? *Code: 1 - YES and 2 - No*

If YES, specify total number of job vacancies:

EIN	PSOC Code	Job Title/Occupation	Status	Category	Number of Vacancies	Number of App

Record: of 1

- Code for Status:**
 1 - Regular Position 2 - Non-Regular Position
- Code for Category:**
 1 - Hard-to-fill vacancies 2 - Easy-to-fill vacancies
- Code for Reason:**
 1 - No applicant, i.e., no person applied for the job
 2 - Applicants lack years of experience
 3 - Applicants lack needed competency/skill
 4 - Applicants lack of professional license/TESDA Skills Certification

- 5 - Applicant's expectation of high salary
 6 - Location of work schedule problem
 7 - Applicant prefer overseas employment
 8 - Others (specify)

PART II: EMPLOYMENT

Reference Date: June 30, 2010

Item of Inquiry	Acceptable Entry
1. Total Employment	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be the sum of entries in item nos. 1.1., 1.2. and 1.3.
1.1. Working owners	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should not exceed the figure provided in item no. 1.3.
1.2. Unpaid workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should not exceed the figure provided in item no. 1.3.
1.3. Employees	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be the sum of entries in item nos. 1.3.1., 1.3.2. and 1.3.3.
1.3.1. Managers/Executives	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • The proportion of this group should not exceed 40 percent of the total employment. If the entry is not within the range, verify with the Senior LEO/reviewer.
1.3.2. Supervisors/Foremen	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • The proportion of this group should not exceed 30 percent of the total employment. If the entry is not within the range, verify with the Senior LEO/reviewer.
1.3.3. Rank and File workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be the sum of entries in item nos. 1.3.3.1 and 1.3.3.2.
1.3.3.1. Regular workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be less than the figure provided in item no. 1.3.3.
1.3.3.2. Non-regular workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be less than the figure provided in item no. 1.3.3.

PART II: EMPLOYMENT
(continued)

Item of Inquiry	Acceptable Entry
2. Employment of Specific Groups of Workers	
2.1. Young workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry may be equal to or less than the figure provided in item no. 1.3.
2.2. Female workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry may be equal to or less than the figure provided in item no. 1.3.
2.3. Time-rated workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry should be the sum of entries in item nos. 2.3.1 and 2.3.2.
2.3.1 Full-time workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be the sum of entries in item nos. 2.3.1.1 to 2.3.1.3.
2.3.1.1 Hourly	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry here should be equal to the figure provided in item no. 2.3.1 if there are no daily or monthly workers. • Entry should be less than the figure provided in item no. 2.3.1.
2.3.1.2 Daily	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry here should be equal to the figure provided in item no. 2.3.1 if there are no daily or monthly workers. • Entry should be less than the figure provided in item no. 2.3.1.

PART II: EMPLOYMENT
(continued)

Item of Inquiry	Acceptable Entry
2.3.1.3 Monthly	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry here should be equal to the figure provided in item no. 2.3.1 if there are no daily or monthly workers. • Entry should be less than the figure provided in item no. 2.3.1.
Item of Inquiry	Acceptable Entry
2.3.2 Part-time workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry should be less than the figure provided in item no. 2.3. • Note: Entry excludes consultants and those on retainer basis.
2.4 Commission workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry should be equal to or less than the figure provided in item 1.3.3. Entry should be the sum of entries in item nos. 2.4.1 to 2.4.3. • Note: Establishments engaged in insurance, real estate, selling and trade would normally have entries on this item.
2.4.1. With basic pay and commission	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry should be less than the figure provided in item no. 2.4.
2.4.2. Purely on commission with employer control and supervision	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry should be less than the figure provided in item no. 2.4.

PART II: EMPLOYMENT
(continued)

Item of Inquiry	Acceptable Entry
2.4.3. Purely on commission without employer control	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry should be less than the figure provided in item no. 2.4.
2.5. Output-rated workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on each item of inquiry, type "0" (zero). • Entry should be the sum of entries in item nos. 2.5.1 to 2.5.4.
2.5.1. Piece-rated workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on each item of inquiry, type "0" (zero). • Entry should be less than the figure provided in item no. 2.5.
2.5.2. Production standard (quota) workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on each item of inquiry, type "0" (zero). • Entry should be less than the figure provided in item no. 2.5.
2.5.3. "Pakyao" or "Takay" workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on each item of inquiry, type "0" (zero). • Entry should be less than the figure provided in item no. 2.5.
2.5.4. Task workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on each item of inquiry, type "0" (zero). • Entry should be less than the figure provided in item no. 2.5.

PART II: EMPLOYMENT
(continued)

Item of Inquiry	Acceptable Entry
2.6. Non-regular workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry here should be the sum of entries in item nos. 2.6.1 to 2.6.5. • Entry here should be similar to entry in item no. 1.3.3.2. However, if entry is different from that in item 1.3.3.2, sum of details should prevail. • Adjust accordingly affected entries, e.g., items 1.3.3.2, 1.3.3 and item 1.
2.6.1. Probationary workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be less than the figure provided in item no. 2.6. • Accept with or without entry.
2.6.2. Casual workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be less than the figure provided in item no. 2.6. • Accept with or without entry.
2.6.3. Contractual/project-based workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be less than the figure provided in item no. 2.6. • Accept with or without entry. • Entry excludes workers hired through employment agency/cooperative.
2.6.4. Seasonal workers	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be less than the figure in item no. 2.6. • Accept with or without entry.
2.6.5. Apprentices/learners	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry should be less than the figure in item no. 2.6. • Accept with or without entry.
2.6.5.1. Persons enrolled in Special Program for Employment of Students (SPES)/Youth Education – Youth Employability (YEYE)	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. • Entry may be less than or equal to the figure provided in item no. 2.6.5. • Accept with or without entry.

PART II: EMPLOYMENT
(continued)

Item of Inquiry	Acceptable Entry
3. Engaged in outsourcing or sub-contracting?	<ul style="list-style-type: none"> • There should be only one box checked in this item. • If "Yes" is checked, percentage (%) of production process should be specified and there should be at least one (1) entry in item no. 3.1 or one box checked in item no. 3.2. • If "No" is checked, go to Part III.
3.1. Job, work, or service done within the premises of the establishment	
3.1.1 Total no. of workers hired through employment agency	<ul style="list-style-type: none"> • Entry should be the sum of entries in item nos. 3.1.1.1 to 3.1.1.9. • Note: Total workers reported in this item are not part of the entry in item no. 1 (Total Employment).
3.1.1 Total no. of workers hired through workers cooperative	<ul style="list-style-type: none"> • Entry should be the sum of entries in item nos. 3.1.1.1 to 3.1.1.9. • Note: Total workers reported in this item are not part of the entry in item no. 1 (Total Employment).
3.1.1.1 Security services	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry may be equal to or less than the figure provided in item no. 3.1.1.
3.1.1.2 Janitorial	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry may be equal to or less than the figure provided in item no. 3.1.1.
3.1.1.3 General administrative	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry may be equal to or less than the figure provided in item no. 3.1.1.
3.1.1.4 Marketing/Sales	<ul style="list-style-type: none"> • Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). • Entry may be equal to or less than the figure provided in item no. 3.1.1.

PART II: EMPLOYMENT
(continued)

Item of Inquiry	Acceptable Entry
3.1.1.5 Packaging	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). Entry may be equal to or less than the figure provided in item no. 3.1.1.
3.1.1.6 Production Assembly	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). Entry may be equal to or less than the figure provided in item no. 3.1.1.
3.1.1.7 Research and development	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). Entry may be equal to or less than the figure provided in item no. 3.1.1.
3.1.1.8. IT services	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). Entry may be equal to or less than the figure provided in item no. 3.1.1.
3.1.1.9 Others (specify)	<ul style="list-style-type: none"> Type the numeric entry provided in the questionnaire. However, if there is no entry reflected on the item of inquiry, type "0" (zero). Entry may be equal to or less than the figure provided in item no. 3.1.1. If there is an entry, number of workers in the specified work should be indicated.
3.2. Job, work, or service done outside the premises of the establishment	
3.2.1 Production/Assembly	<ul style="list-style-type: none"> There may or may not be a check mark here. If "Production/Assembly" is checked, specific activity/process should be specified. If "Others" is checked, process outsourced/job contracted out should be specified.
3.2.2 Finance/Accounting	
3.2.3 Data processing/Encoding	
3.2.4 Human resource (HR)	
3.2.5 Learning/Training	
3.2.6 Billing and payment	
3.2.7 Transport services	
3.2.8. Courier services	
3.2.9 Packaging/Crating	
3.2.10 Research and development	
3.2.9 Others (specify)	

PART III. OCCUPATIONAL SHORTAGES AND SURPLUSES

Item of Inquiry	Acceptable Entry
1. Were there job vacancies in your establishment from January 2009 to June 2010?	<ul style="list-style-type: none"> • Type "1" if YES or "2" if NO. • If answer is "YES", the total number of job vacancies must be indicated. • For the total number of job vacancies, the entry must be equal to the total of "Number of Vacancies" in column 4.
Col. 1 - PSOC Code	<ul style="list-style-type: none"> • Type the PSOC code specified for each of the corresponding job title/occupation.
Col. 2 - Job Title/ Occupation	<ul style="list-style-type: none"> • Type the complete job title/occupation for each of the identified job vacancies.
Col. 3 - Status	<ul style="list-style-type: none"> • Type the corresponding status code indicated in the corresponding row of job title/occupation.
Col. 4 - Category	<ul style="list-style-type: none"> • Type the corresponding category indicated in the corresponding row of job title/occupation.
Col. 5 - Number of Vacancies	<ul style="list-style-type: none"> • Type the numeric entry reflected in the corresponding row of job/occupation title. • The total number of job vacancies for all job titles/occupations should be the same with the entry in item no. 1.
Col. 6 - Number of Applicants	<ul style="list-style-type: none"> • Type the numeric entry reflected in the corresponding row of job title/occupation.
Col. 7 - Length of Recruitment Period (in months)	<ul style="list-style-type: none"> • Enter the corresponding length of recruitment period (in months) for each job vacancy.
Col. 8 - Specialization/Specific skills	<ul style="list-style-type: none"> • Type the specialization/specific skills indicated for each of the corresponding row of job title /occupation title, e.g., specialization/specific skills needed to fill up a hard-to-fill vacancy.
Col. 9 - (ONLY for Hard to Fill) Reason	<ul style="list-style-type: none"> ▪ Enter the code reflected in the corresponding row of an identified hard-to-fill vacancy.

PART IV. INDUSTRIAL RELATIONS PRACTICES
A. Balancing Work and Family Responsibilities
and Working Time Arrangements

Item of Inquiry	Acceptable Entry
<p>1. Which of the following facilities are available in your establishment?</p>	<p>For item nos. 1.1 to 1.4</p> <ul style="list-style-type: none"> • 1 = for every checked item; Otherwise, leave it blank • For Others, enter as specified. • Multiple entries are acceptable.
<p>2. Which of the following programs are being implemented in your establishment?</p>	<p>For item nos. 2.1 to 2.4</p> <ul style="list-style-type: none"> • 1 = for every checked item; Otherwise, leave it blank • For Others, enter as specified. • Multiple entries are acceptable.
<p>3. Which of the following non-statutory leave arrangements are provided to each occupational category in your establishment?</p>	<p>Multiple entries per column are acceptable, type</p> <ul style="list-style-type: none"> • 1 = for every checked item; Otherwise, leave it blank • For Others, enter as specified.
<p>4. Which of the following flexible work arrangements are being adopted for each occupational category in your establishment?</p>	<p>Multiple entries per column are acceptable, type</p> <ul style="list-style-type: none"> • 1 = for every checked item; Otherwise, leave it blank • For Others, enter as specified.
<p>5. Which of the following workdays and work schedules for majority of your workers are being adopted in your establishment?</p> <p>a. Workdays</p>	<ul style="list-style-type: none"> • For item 5a, workdays adopted, type <ul style="list-style-type: none"> 1 - Monday to Friday; 2 - Monday to Saturday; 3 - Monday to Sunday; 4 - Monday to Thursday; 5 - Varies from Week to Week; 6 - Weekends Only; or 7 - Others • For Others, enter as specified. • For reason for adoption of workdays, type <ul style="list-style-type: none"> 1 - Requirement of the job; 2 - Company-imposed policy; 3 - Worker's preference; 4 - Nature of business; 5 - Care for children; 6 - Earn more money; 7 - Do part-time job; or 8 - Others • If Code 1 or 2 is chosen in workdays adopted, there should be <u>no entry</u> for reason for adoption.

Item of Inquiry	Acceptable Entry
<p>5. Which of the following workdays and work schedules for majority of your workers are being adopted in your establishment?</p> <p>b. Work schedule</p>	<p>For item 5b, work schedule, type</p> <ul style="list-style-type: none"> 1 - fixed daytime schedule; 2 - Fixed evening schedule; 3 - Rotating Shift; 4 - Split Shift; 5 - Flexible daytime schedule; 6 - Flexible evening schedule; 7 - On irregular schedule; or 8 - On call. <p>For reason of adoption of work schedule, type</p> <ul style="list-style-type: none"> 1 - Requirement of the job; 2 - Company-imposed policy; 3 - Worker's preference; 4 - Nature of business; 5 - Care for children; 6 - Earn more money; 7 - Do part-time job; or 8 - Others.
<p>6. What is the usual operating hours of your establishment?</p>	<ul style="list-style-type: none"> • For item no. 6, usual operating hours, type <ul style="list-style-type: none"> 1 - 8 hours a day; 2 - 12 hours a day; 3 - 16 hours a day; 4 - 24 hours a day; or 5 - Others • For Others, enter as specified.
<p>7. How many employees are on the evening (e.g., 3:00P.M. until 11:00 P.M. until midnight) and graveyard (e.g., 10:00 P.M. until 6:00 A.M. or midnight until 8:00 A.M.) shifts, if there are any?</p>	<ul style="list-style-type: none"> • Type the numeric entry for Total reflected in the questionnaire. Entry here should not be more than the entry in Part II item 1.3. • Type the numeric entry for Female reflected in the questionnaire. Entry here should not be more than the entry in Part II item 2.2.
<p>8. Do employees work extra hours in excess of their regular work hours?</p>	<ul style="list-style-type: none"> • Accept only one entry, type <ul style="list-style-type: none"> 1 - Yes; 2 - No.
<p>9. What is the arrangement for extra hours of work of employees?</p>	<p>Multiple entries are acceptable, type</p> <ul style="list-style-type: none"> • 1 = for every checked item; Otherwise, leave it blank • For Others, enter as specified.

PART IV. INDUSTRIAL RELATIONS PRACTICES
B. Occupational Safety and Health

Item of Inquiry	Acceptable Entry
1. What activities are conducted or practiced in the company as part of your prevention and control measures against work safety and health hazards?	For item nos. 01-26, to each <u>activities</u> , type 1 = Yes, 2=Not Yet, 3=No Plan or 4= Not Applicable/Not Needed. If Others is chosen, type the corresponding details as specified.
2. Which of the following Occupational Safety and Health policies and programs are currently implemented in your establishment?	For item nos. 01-15, to each <u>policies/programs</u> , type 1 = Yes, 2=Not Yet, 3=No Plan or 4= Not Applicable/Not Needed. For Others , type the corresponding details as specified.
3. Which of the following provisions are available in your establishment?	For item nos. 01-20, to each <u>provisions/facilities/amenities</u> , type 1 = Yes, Adequate, 2= Yes, but Inadequate or 3= None. If None is chosen, on the Reason for Non-Provision Column, type 1= Too Costly, 2= Very few workers, 3= Not required by law, 4=No available space, 5= Not needed/not applicable or 6= Others. If Others is chosen, type the corresponding details as specified.
4. Which of the following OSH-related trainings/seminars were provided to your employees for the last two (2) years?	For item nos. 1-28, to each <u>OSH-related trainings/seminars</u> , type 1 = Yes, 2=No or 3=Not Applicable/Not Needed; For Others , type the corresponding details as specified.
5. Which agency(ies) conducted any of the above trainings?	For item 01-10, to each <u>Agencies</u> , type 1 = Often, 2=Sometimes or 3=Never; For Others , type the corresponding details as specified.
6. Who is/are the designated health and safety personnel(s) in your establishment?	For item no. 6, type 1 for every checked item. Otherwise, leave it blank.

PART V_A: OCCUPATIONAL INJURIES

EIN:

Batch No:

1. Did your establishment experience any occupational accidents during the year?

2. How many occupational accidents were there?

TYPE OF INJURY (1)	Fatal Cases (2)	Permanent Incapacity		Temporary Incapacity		Cases Without Lost Workdays (7)
		Cases (3)	Lost Workdays (4)	Cases (5)	Lost Workdays (6)	
3. Total (sum of corresponding entries in cols. 2 to 7)						
3.1. Superficial injuries and open wounds						
3.2. Fractures						
3.3. Dislocations, sprains and strains						
3.4. Traumatic amputations						
3.5. Concussion and internal injuries						
3.6. Burns, corrosions, scalds and frostbites						
3.7. Acute poisoning and infections						
3.8. Foreign body in the eye						
3.9. Others						

PART OF THE BODY INJURED (1)	Fatal Cases (2)	Permanent Incapacity Cases (3)	Temporary Incapacity Cases (4)	Cases without Lost Workdays (5)
4. Total				
4.1. Head				
4.2. Neck				
4.3. Back				
4.4. Trunk or Internal Organs				
4.5. Arm and shoulder				
4.6. Wrist and hand				
4.7. Lower Extremities				
4.8. Whole Body or Multiple Sites Equally Injured				

Cause of Injury	Fatal Cases (2)	Permanent Incapacity Cases (3)	Temporary Incapacity Cases (4)	Cases without Lost Workdays (5)
5. Total				
5.1. Falls of persons				
5.2. Struck by falling objects				
5.3. Stepping on, striking against or struck by objects, excluding falling objects				
5.4. Caught in or between objects				
5.5. Over-exertion or strenuous movement				
5.6. Exposure to or contact with extreme temp				
5.7. Exposure to or contact with electric current				
5.8. Exposure to or contact with harmful substance				
5.9. Others				

Agent of Injury				
6. Total				
6.1. Buildings, structures				
6.2. Prime movers				
6.3. Distribution systems				
6.4. Hand tools				
6.5. Machines, equipment				
6.6. Conveying/transport/packaging equipment				
6.7. Materials, objects				
6.8. Chemical substances				
6.9. Human, animals, plants, etc.				
6.10. Others				
Major Occupation Group				
7. Total				
7.1. Corporate executives, managers, managing proprietors and supervisors				
7.2. Professionals				
7.3. Technicians and associate professionals				
7.4. Clerks				
7.5. Service workers and shop and market sales workers				
7.6. Craft and related trades worker				
7.7. Plant and machine operators and assemblers				
7.8. Laborers and unskilled workers				

PART V_B: DISEASES

EIN: Batch No:

OCCUPATIONAL DISEASES (1)	Cases (2)
8.1. Occupational dermatitis (including skin conditions due to chemical agents which are skin irritants and sensitizers)	<input type="text"/>
8.2. Occupational asthma (due to exposure to allergies in the working environment)	<input type="text"/>
8.3. Acute poisonings (due to exposure to chemical toxic substances)	<input type="text"/>
8.4. Heat stroke, cramps, exhaustion (due to exposure to excessive heat)	<input type="text"/>
8.5. Chilblain, frostbite, freezing (due to exposure to excessive cold)	<input type="text"/>
8.6. Deafness (loss of or decreased hearing due to excessive exposure to noise)	<input type="text"/>
8.7. Tuberculosis (infections due to mycobacterium tuberculosis)	<input type="text"/>
8.8. Other Infections (due to exposure to biologic hazards/agents, ex. anthrax, brucellosis, leptospirosis, tetanus, ornithosis, rabies, viral encephalitis, viral hemorrhagic fevers, hepatitis A, B, C,D, HIV, mycoses, protozoal and parasitic diseases)	<input type="text"/>
8.9. Cataract (due to exposure to glare of or rays from molten glass or red hot metal)	<input type="text"/>
8.10. Cardio-vascular diseases (cardiac injury or acute attack precipitated by unusual strains of work)	<input type="text"/>
8.11. Essential hypertension (primary hypertension that cause impairment of function of kidneys, ears, eyes and brain resulting in permanent disability)	<input type="text"/>
8.12. Peptic ulcer (due to prolonged emotional or physical stress at work)	<input type="text"/>
8.13. Work-related musculoskeletal disorders (caused or made worst by work such as exposure to forceful exertions, highly repetitive motions, awkward body postures, vibrations, etc.)	<input type="text"/>
8.13.1. Carpal tunnel syndrome (tingling, numbness, or pain in wrist and hand from compression of the median nerve at the wrist area due to repetitive or forceful hand movement)	<input type="text"/>
8.13.2. Shoulder tendinitis (inflammation of the tendon affecting the shoulder joint due to use, overuse and pressure)	<input type="text"/>
8.13.3. Neck-shoulder pain (affecting the bones, joints, connective tissue, muscles and nerves of the cervical area)	<input type="text"/>
8.13.4. Back pain (affecting the bones, joints, connective tissue, muscles and nerves at the lumbar or sacral regions but not due to trauma)	<input type="text"/>
8.13.5. Other work-related musculoskeletal disorders (specify) <input type="text"/>	<input type="text"/>
8.14. Others (specify)	<input type="text"/>
8.14.1. Others <input type="text"/>	<input type="text"/>
8.14.2. Others <input type="text"/>	<input type="text"/>
8.14.3. Others <input type="text"/>	<input type="text"/>
9. Did any of your workers experience commuting accidents in 2009? <input type="text"/>	
9.1. How many commuting accidents were there? <input type="text"/>	9.1.. How many workers were injured? <input type="text"/>
10. How many hours were actually worked by all employed persons in your establishment in 2009? <input type="text"/>	

<input type="text"/>	x	<input type="text"/>	x	<input type="text"/>	+	<input type="text"/>	+	<input type="text"/>	=	<input type="text"/>
Average Employment		Regular working hours per day Ex. 6, 7, 8, or 12		Days actually worked during the year Ex. 250 or 302		Total overtime hours on regular working days of all persons who rendered overtime work		Total hours worked on rest days, special days and regular holidays of all persons who rendered work on these days		Hours actually worked

PART V: OCCUPATIONAL INJURIES AND DISEASES

For Items 1 and 9. Select from the list

For Items 2-8 and 9.1 – 10. Type the corresponding entry as reflected in the questionnaire.