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Business ID: _____

Booklet No: _____ of _____

FORM B – CONTINUATION

1	2	3	4	5a	5b	5c	6	7
Employee Survey ID #	Sex	Age	Immigration Status Code (see codes below)	Education Code (Highest Level Completed) (see codes below)	With Professional Qualification for the Current Job? (Yes or No)	What is the required education level for the job? (see codes below)	Job Title / Occupation	Brief Description of MAIN Duties or Tasks

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FORM B – CONTINUATION

Employee Survey ID #	8	9	10	11	12	13	14		
	Type of Worker by Compensation (see codes below)	Type of Employment Contract (see codes below)	Usual/Normal Working Hours (per week)	Total number of actual hours worked during Oct 1 to 31, 2023. (excluding paid overtime and leaves)	Pay Period (see codes below) If the pay period is 2 thru 5, go to Q14	Actual Hourly Rate (per worker)	Total Gross Salary/Wages paid for the month of October 2023 (CI$)		
							a) Salary/Wages (excluding overtime)	b) Overtime	c) Payment in Kind (excluding allowances)

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FORM B – CONTINUATION

Employee Survey ID #	15					16					
	Other compensation for the month of October 2023 (CI $)					Allowances/benefits paid to employees (CI $)					
	a) Acting or duty allowance	b) Commission	c) Bonus	d) Gratuities	e) Tips (actual or estimate)	a) Housing allowance in Oct 2023	b) Local transportation allowance in Oct 2023	c) Vacation or repatriation transportation assistance for the period Nov 2022 to Oct 2023	d) Training/education assistance for the period Nov 2022 to Oct 2023	e) Value Clothing allowance in Oct 2023	f) Other Allowance