

**Legal Entity Identifier India Limited**

**FORM- 'N'**

**NOTICE OF SHIFT SCHEDULE WEEKLY HOLIDAY OF EMPLOYEES ENGAGED IN SHIFT**

Name of the Establishment: Legal Entity Identifier India Limited

Name of the Manager / Authorised Representative : Ms. Ipsita Saha

All the employees in the establishment are hereby informed that the establishment operates in shift. The shift schedule of the workers is as follows:-

<b>Dates of the Month</b>	<b>General Shift</b>	10:00am-6:00pm
<b>Dates of the Month</b>	<b>1<sup>st</sup> Shift</b>	Staggered Shift timings (8 hours working)
<b>Dates of the Month</b>	<b>2<sup>nd</sup> Shift</b>	
<b>Dates of the Month</b>	<b>3<sup>rd</sup> Shift</b>	
<b>Weekly</b>	<b>holiday</b>	Sunday