



#### 4 Reasons for redundancies

Please tick one or more boxes to show the main reason(s) for the proposed redundancies:

- lower demand for products or services  **A**
- completion of all or part of contract  **B**
- transfer of work to another site or employer  **C**
- introduction of new technology/plant/machinery  **D**
- changes in work methods or organisation  **E**
- another reason  **F** please give brief details below

#### 5 Staff numbers/redundancies at this establishment

Occupational group	Number of employees	Number of possible redundancies
Manual	<input type="text"/>	<input type="text"/>
Clerical	<input type="text"/>	<input type="text"/>
Professional	<input type="text"/>	<input type="text"/>
Managerial/technical	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
<b>Totals</b>	<input type="text"/>	<input type="text"/>
Number of long-term trainees included in above who may be made redundant		<input type="text"/>
Number of long-term trainees under 20 years of age included in above who may be made redundant		<input type="text"/>

#### 6 Closure of establishment

Do you propose to close the establishment?

- Yes
- No

#### 7 Timing of redundancies

Date of first proposed redundancy

Date of last proposed redundancy

#### 8 Method of selection for redundancy

Please give brief details of how you will choose the employees to be made redundant

#### 9 Consultation

Are any of the groups employees, who may be made redundant, represented by a recognised trade union?

Yes  please list these trade unions below

No

Have you consulted any of the trade unions listed above?

Yes  Date consultation started

No

Have you consulted elected representatives of the employees?

Yes  Date consultation started

No

#### Declaration

I certify that the information given on this form is, so far as I know, correct and complete.

Signed

Date

Position held

#### For our use