

EMPLOYEES TERMINATED: PERMANENT PART-TIME*

NOTE: See Instructions

Form **6** Part B

Name of Business:				Industrial Sector:						Reporting Period:		
Location ☐ National (Canada) ☐ Province/Territory (specify)												
Occupational Groups	All Employees			Aboriginal Peoples			Persons with Disabilities			Members of Visible Minorities		
	Total Number	Men	Women	Total Number	Men	Women	Total Number	Men	Women	Total Number	Men	Women
	Col. 1	Col. 2	Col. 3	Col. 4	Col. 5	Col. 6	Col. 7	Col. 8	Col. 9	Col. 10	Col. 11	Col. 12
Senior Managers												
Middle and Other Managers												
Professionals												
Semi-Professionals and Technicians												
Supervisors												
Supervisors: Crafts and Trades												
Administrative and Senior Clerical Personnel												
Skilled Sales and Service Personnel												
Skilled Crafts and Trades Workers												
Clerical Personnel												
Intermediate Sales and Service Personnel												
Semi-Skilled Manual Workers												
Other Sales and Service Personnel												
Other Manual Workers												
Total Number of Employees Terminated												

* Use Part A for permanent full-time employees