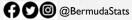




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September 2024
Design: Department of Communications

CONTENTS

Introduction	I
Form A – Current Vacancies	
Instructions for completing Form A	3
Example of Form A	5
Forms B and C – Common Definitions	
Common Definitions for Forms B and C	6
Form B – New Employees	
Instructions for completing Form B	7
Gross Annual Income Bands	11
Example of Form B	12
Form C – Employees and Occupations	
Instructions for completing Form C	13
Example of Form C	14
Employer Details	15
Frequently Asked Questions	16





Introduction

The purpose of these guidance notes is to explain how to complete the Employment Survey forms. You will notice that much of the information gathered is common to all forms. We strongly advise that you take a moment to read these Guidance Notes before filling them in. Important definitions modifications / additions are included in the Guidance Notes such as:

- Employee
- Existing Employee
- Filled lob
- Layoff
- New Employee

If you have any questions regarding the survey documents or if any of the items listed below are missing, please call the Department of Statistics at 444-1758, 444-1757 or 246-8754. The Department of Statistics is located on the third floor of the Cedar Park Centre, 48 Cedar Avenue, Hamilton.

The 2024 reference week is Sunday, 25 August survey Saturday, 31 August 2024. You must therefore ensure that all information written on the survey forms A, B and C reflects your employees' situations as they were during that week. For this reason, we request that you fill in your survey forms reference week. All businesses are required to complete the gross annual income and benefits information for their new and existing job holders, see page 9.

Form F should be completed employees from only by new hired 3 September 2023 to 31 August 2024. Copies of Form F can be downloaded from our web page at https://www.gov.bm/employment-statistics. You may also download a copy of the Bermuda Standard Classification **Occupations** (BSCO) and 2024 Employment Survey Guidance Notes. the

All survey forms should be completed and returned to the Department of Statistics by **21 October 2024** via email (employmentsurvey@gov.bm), fax (295-8390), or mail.

Your envelope should contain:

- A letter from the Director of Statistics that explains the purpose of the survey.
- 2. A Current Vacancies form (Form A).
- 3. A **New Employees form** (Form B).
- 4. A return envelope for completed survey forms (**No postage required**).

If your business made a return last year, you should also find:

5. The **Employees and Occupations form** showing all of your business' employees during last year's reference week (Form C).

Before returning your completed survey forms, you should also check that the following information is correct:

- Your name or the business name and address (including postal code and telephone number) at the top of the first page of each survey form.
- The spelling of your employees' names, especially those employees whose information was ticked '**no change**'.

FORM A - CURRENT VACANCIES

Instructions

A vacant position is a funded position that you have not filled which you are preparing to fill or recruiting to fill. The Current Vacancies form, **Form A**, is used for recording all vacant positions in existence as at the last day of the Reference Week, that is **31 August 2024**. On Form A, the information that is required includes:

- 1. **JOB TITLE:** Choose the title of the job description in the BSCO that most closely matches that of the vacant job. Record in the job title as it is given in the BSCO.
- 2. **OCCUPATION CODE:** You can find the code in the BSCO immediately across from the job title. Record in the job code corresponding to the job title entered.
- 3. **FULL OR PART-TIME:** The number of normal hours worked in the job per week. Any job requiring less than 35.0 hours per week is part-time. Any job 35.0 or more hours per week is full-time. Record the word 'FULL' or the word 'PART' in the space provided, as appropriate.
- 4. **NO. OF WEEKS VACANCY UNFILLED:** in the last column enter the number of weeks the job has been vacant including the Reference Week, if applicable. If the job has been filled and became vacant repeatedly during the year, simply give the length of time since the job last became vacant.

Completing the Current Vacancies Form

Please refer to page 5. This is an example of a **Form A** modified according to the following instructions.

During the course of the I2-month period between last year's and this year's reference weeks, two positions within the No Name Company became vacant and are not yet to be filled.

The job title 'Salesperson' along with its corresponding occupation code '3313' must be recorded in the columns headed 'JOB TITLE' and **'OCCUPATION CODE',** respectively. When filled, this position normally requires the job holder to work 35.0 per week; therefore, the word hours "Full" is inserted in the appropriate box under the 'FULL or PART-TIME' column. The number '15' should be inserted in the space below the column headed 'NO. OF WEEKS VACANCY UNFILLED' because the job was unfilled for 15 weeks up to and including the reference week.

The post of 'Sales Clerk, Retail Trade' has also been vacated and has remained unfilled. The job title and the corresponding occupation code '5212' are each placed under the columns so named.

When last occupied the job required its holder to work less than 35.0 hours per week; therefore, the word 'Part' denoting part-time must be recorded in the appropriate box under the column headed 'FULL OR PART-TIME'. Counting backward inclusively from the reference week, it has been determined that the post has been vacant for a total of 30 weeks. Place '30' in the weeks unfilled column.

Government of Bermuda Statistics Act 2002 (Clause 11)

NO NAME COMPANY NO STREET NO PARISH NO EMPLOYER NAME: ADDRESS:

JOE NAME 230-0000

PHONE NO.:

ES CONTACT PERSON:

Page (No. Lof 3)

NO BX

ID NO: 1234567

CURRENT VACANCIES "FORM A"

Job Title	Occupation Code	FULL or PART Tm	# of Wks Unfilled
Sales Person	3313	FULL	15
Sales Clerk, Retail Trade	5212	PART	30

The above details relating to the period Sunday, 25 August 2024 — Saturday, 31 August 2024 are correct to the best of my knowledge and belief.

AUTHORISED SIGNATORY DATE COMPLETED 25 / 09 / 2024 Joe Name NAME OF AUTHORISED SIGNATORY (Please Print)_

Joe Name

N.B. I. This form must be completed and returned to the Department of Statistics by Monday, 21 October 2024

FORMS B AND C - COMMON DEFINITIONS

Filled Job - A filled job is one which has an employee in the post.

Employee - An employee is someone who has a formal employment agreement / contract on a paid or unpaid basis irrespective of the number of hours worked and whether they made contributions to benefits. For the purposes of the Employment Survey, the following are included in the definition of an employee as long as they have an employment contract (paid or unpaid):

- Apprentices
- Interns
- Laid off workers
- On-call workers
- Self-employed workers
- Summer students
- Trainees
- Workers absent for any reason for any duration (e.g. maternity leave, sick leave, vacation leave, administrative leave, etc.)

If a person is not an employee of the reporting establishment, he/she must be excluded from the definition of employee. Examples of persons that fall under this category are as follows:

- Casual Workers
- Consultants
- Secondees
- Volunteers

Layoff - A layoff is where an employer temporarily suspends the activities of the employee for economic reasons and not for an employee's actual performance during the Survey Reference week. The laid off person shall be considered an employee who has been temporarily relieved of the duties of a filled job, so long as they retain a contract with their employer.

FORM B – NEW EMPLOYEES

Instructions

New employee – an employee employed subsequent to the last Employment Survey (27 August to 2 September 2023) and remained employed during the 2024 Reference Week (25 August to 31 August 2024).

On the New Employees form **(Form B)**, all staff members (either paid or unpaid) that were employed subsequent to the last Employment Survey and remain employed during the Reference Week.

ID NO.: This is a computer-generated identification number that was assigned when your business came into existence.

(Page No. ___ of ___): You should number the completed forms in the following order. Form A'(Page No. I of 3)', Form B'(Page No. 2 of 3)'and Form C'(Page No. 3 of 3)'.

Employer Name: The name of your business. If the business has no name, enter the name of the working owner or self-employed person.

Address: Your full street or mailing address, whichever is most appropriate.

Contact Person: If you are self-employed and your name does not appear on the contact person line, print your name there. For larger employers, the contact person will generally be the person responsible for completing the survey forms.

Phone No.: The business telephone number (7 digits) of the person responsible for completing the Employment Survey.

Name of Authorised Signatory: Print your full name in the space provided so that the survey officers can easily contact the right person if the need arises.

Authorised Signatory: Sign your name at the bottom of each form after you complete it, as this will help us verify the authenticity of your return.

Date Completed: You must also indicate the date that the forms were completed. Enter the day, month and year in that order, e.g. 21 October 2024 will be 21 10 2024.

Job Holder Details

Form B (New Employees) and Form C (Employees & Occupations) are used to collect and modify the following job holder information.

Surname, Forename and Initials: Insert each name in the space at the left-hand side of each box.

Date of Birth: Record the birth date of each job holder in day, month and year order. An employee whose date of birth is 8 February 1981 should be written 08 02 1981.

Sex: Record 'M' for male or 'F' for female job holders. Remember that a person's sex is not always clear from the first name, e.g. Robin, Tracey, and Ashley.

Race: Form F should only be completed by new employees hired after last year's Survey or by existing employees whose race is listed incorrectly on Form C. Electronic copies of Form F are available at https://www.gov.bm/employment-statistics. Employees must record their name and date of birth in the appropriate place and circle the number code that corresponds with the most appropriate racial group. Employees should then sign and fold the form and return it to their employer. Transfer the employee race code to Form B or Form C, whichever is applicable. The following race codes apply.

- I. Black
- 2. White
- 3. Asian
- 4. Black and White
- 5. Black and Other
- 6. White and Other
- 7. Other

Occupation Code: Use the BSCO booklet to identify the occupation code that most accurately describes a job holder's duties.

Bermudian Status B/NB/P/S: If the job holder is a Bermudian place a **'B'** in the 'Status' column. Record **'P'** if the job holder is a non-Bermudian but holds a permanent residence certificate. Place an **'S'** under the 'Status' column if the individual is a non-Bermudian spouse of a Bermudian. All other non-Bermudians should be classified as **'NB'**.

Actual Hrs.: Refers to the actual hours spent **at the job** during the **reference week** and includes both regular time and overtime but excludes unpaid down time such as lunch period. Remember to exclude absences such as sick or vacation leave. To capture layoffs, place **00.0** in the Actual Hours of Work field.

Normal. Hrs.: Normal hours refers to the hours that the person is contracted to work in a typical week whether or not they happened to be at work during the reference week. To capture layoffs, record **99.9** in the Normal Hours of Work field.

Gross Annual Income from Employment (Grs Ann Inc): Use the gross annual income bands sheet on page II to record the letter code that represents the gross annual income bracket of every job holder in your organisation. Gross annual income includes employment income before deductions from wages, salaries (excluding overtime), commissions, bonuses, tips and earnings from self-employment. Where an employee has not worked for an entire year in his or her current position, use the weekly or monthly equivalent that corresponds with what the income would have been if he had worked for an entire year. Where an employee normally receives tips or gratuities, or is paid on a commission basis, choose the income bracket that represents the best estimate of gross annual income.

Benefits: Refers to the employment benefits that a job holder is entitled to receive. Place a check mark in the box that corresponds with the benefit(s) that each employee is entitled to receive. Benefits comprise the following:

Annual Bonus (AB): Tick the annual bonus column if the job holder is eligible to receive an annual monetary gift.

Car Allowance (CA): Tick the car allowance column if the job holder is entitled to receive reimbursement or an allowance for personal transportation expenses.

Housing Allowance (HA): Tick the housing allowance column if the job holder is entitled to receive subsidised rental housing.

Mortgage Subsidy (**MS**): Tick the mortgage subsidy column if the job holder is entitled to receive supplements for employee-purchased housing.

Stock Options (SO): Tick the stock options column if the job holder is entitled to participate in an employee stock option plan(s).

Travel Allowance (TA): Tick the travel allowance column if the job holder is entitled to receive reimbursement or an allowance for expenses associated with travel.

Other (O): Tick the other column if the job holder is entitled to receive a benefit that cannot be classified under any other specific category. Other benefits (O) include provisions such as employer subsidised childcare services and access to a recreational, fitness or wellness facility, **but excludes all legally mandated benefits** such as health insurance and pension benefits.

Owner: Place a **'X'** in the box if the job holder owns or co-owns the business. Otherwise, leave the space blank.

Summer Student (SUM STU): If a student filled a job, place a **'X'** in the summer student column. Otherwise leave the space blank. A student is someone who attends school full-time and is being employed only during a vacation period.

Part-Time Job (P/T JOB): The number of normal hours worked in the job per week. Jobs requiring less than 35.0 hours per week are considered part-time.

Completing the New Employees Form

Please refer to page 12. This is an example of **Form B** modified according to the following instructions.

ADAMS, JOHN C. was employed to fill the position of manager for accounting. Print his surname, forename and initials in the appropriate columns. Enter his birth date I October 1973 (01-10-1973) under the column headed 'DATE OF BIRTH'. Place an 'M' for male in the space under the column headed sex. The appropriate occupation code for the job he holds (1323) is written in the 'OCCUPATION CODE' column. He is a Bermudian; therefore, a 'B' is placed in the 'STATUS' column. He worked 52.0 hours during the reference week: however, he normally works 40.0 hours per week. On the employee information form, he circled code number '2'. Record the number '2' in the 'RACE' column directly across from his name. John's gross annual salary which includes his bonus and car allowance is \$96,750. Record an '1' in the income column across from his name and an 'X' in the annual bonus and car allowance boxes.

BEAN, CHARLTON D. was recently employed as a retail buyer (occupation code 3315). His date of birth is 10 December 1968 (10-12-1968) and he is a non-Bermudian spouse of a Bermudian S. He actually worked 40.0 hours during the reference week but normally works 35.0 hours a week. He circled code '1' on the employee information form. Transfer this code into the appropriate cell. Mr. Bean earns \$680 per week so a C should be placed in the income column next to his name and place an 'X' in the travel allowance box since he is entitled to reimbursement for certain travel costs that he incurs while abroad on company business.

CANN, DEANNA E. was employed two months ago as a part-time sales clerk (5212). An 'X' must be placed in the box, which corresponds to her name under the 'PART-TIME JOB' column. As a Bermudian by grant of status the code 'B' is placed in the 'STATUS' column. Deanna Cann was born on 2 March 1988 (02-03-1988) and she circled code '2' on the employee information form. She was hired with the agreement that the job required her to work 21.0 hours per week and she actually worked 21.0 hours during the reference week. As a part-time sales clerk, Ms. Cann makes \$460 per week and she is entitled to no benefits. Record a 'B' in the income column and leave the benefits boxes unmarked.

GROSS ANNUAL INCOME BANDS

Gross Income refers to income before deductions from the following sources: wages, salaries (**excluding overtime**), commissions, bonuses, tips, net earnings from own business and self-employed

SE	LECT ONE CODE IF USING		SEL	LECT ONE CODE IF USING		SEL	ECT ONE CODE IF USING
W	eekly Income Equivalent	OR	Мо	onthly Income Equivalent	OR	Anr	nual Income Equivalent
Α	\$1 to under \$231		Α	\$1 to under \$1,000		Α	\$1 to under \$12,000
В	\$231 and under \$577		В	\$1,000 and under \$2,500		В	\$12,000 and under \$30,000
С	\$577 and under \$692		С	\$2,500 and under \$3,000		С	\$30,000 and under \$36,000
D	\$692 and under \$923		D	\$3,000 and under \$4,000		D	\$36,000 and under \$48,000
E	\$923 and under \$1,154		E	\$4,000 and under \$5,000		Е	\$48,000 and under \$60,000
F	\$1,154 and under \$1,385		F	\$5,000 and under \$6,000		F	\$60,000 and under \$72,000
G	\$1,385 and under \$1,615		G	\$6,000 and under \$7,000		G	\$72,000 and under \$84,000
Н	\$1,615 and under \$1,846		Н	\$7,000 and under \$8,000		Н	\$84,000 and under \$96,000
I	\$1,846 and under \$2,077		I	\$8,000 and under \$9,000		I	\$96,000 and under \$108,000
J	\$2,077 and under \$2,538		J	\$9,000 and under \$11,000		J	\$108,000 and under \$132,000
K	\$2,538 and under \$3,000		K	\$11,000 and under \$13,000		K	\$132,000 and under \$156,000
L	\$3,000 and under \$4,519		L	\$13,000 and under \$19,583		L	\$156,000 and under \$235,000
М	\$4,519 and under \$6,731		М	\$19,583 and under \$29,167		М	\$235,000 and under \$350,000
Ν	\$6,731 and under \$9,615		Ν	\$29,167 and under \$41,667		Ν	\$350,000 and under \$500,000
0	\$9,615 and under \$12,500		0	\$41,667 and under \$54,167		0	\$500,000 and under \$650,000
Р	\$12,500 and under \$14,423		Р	\$54,167 and under \$62,500		Р	\$650,000 and under \$750,000
Q	\$14,423 and under \$16,346		Q	\$62,500 and under \$70,833		Q	\$750,000 and under \$850,000
R	\$16,346 and under \$17,308		R	\$70,833 and under \$75,000		R	\$850,000 and under \$900,000
S	\$17,308 and over		S	\$75,000 and over		S	\$900,000 and over
Т	Unpaid		Т	Unpaid		Т	Unpaid

Government of Bermuda Statistics Act 2002 (Clause 11)

EMPLOYER NAME: ADDRESS:

ID NO.: 1234567

NO NAME COMPANY NO STREET NO PARISH

NO BX

JOE NAME 230-0000 ES CONTACT PERSON: PHONE NO.:

Page (No. 2 of 3)

"FORM B" NEW EMPLOYEES

P/T JOB			×					
SUMS TU								
SO TA O ER TU JOB								
0								
₹		×						
S								
Σ								
¥								
S S	×							
Benef AB	×							
Grs Benefits Ann Inc AB CA HA MS	_	U	В					
	40.0	35.0	21.0					
Act Hrs. Norm Hrs.	52.0	40.0	21.0					
l .	а	s	В					
Occupation Code Status B/NB/S/P	1323	3315	5212					
Race	2	_	2					
	Σ	Σ	ш					
Date of Birth Day Month SEX Year	1973	8961	1988					
of Birt	0	12	03					
Date	10	01	02					
Forename	John C.	Charlton D.	Deanna E.					
Surname	Adams	Bean	Cann					

The above details relating to the period Sunday, 25 August 2024 — Saturday, 31 August 2024 are correct to the best of my knowledge and belief.

AUTHORISED SIGNATORY DATE COMPLETED 25 / 09 / 2024 NAME OF AUTHORISED SIGNATORY (Please Print) Joe Name

Joe Name

N.B. I. This form must be completed and returned to the Department of Statistics by Monday, 21 October 2024

Columns for "Gross Annual Income" and "Benefits" apply to all companies.
 *key to abbreviations: "AB" Annual Bonus, "CA" Car Allowance, "HA" Housing Allowance,
 "MS" Mortage Subsidy, "SO" Stock Options, "TA" Travel Allowance, "O" Other

FORM C - EMPLOYEES AND OCCUPATIONS

Instructions

Existing employee - an employee employed during the last Employment Survey (27 August to 2 September 2023) and remained employed during the 2024 Reference Week (25 August to 31 August 2024).

If your business completed an Employment Survey return in 2023, you will find an Employees and Occupations Form in your package. You will notice that Form C is almost identical to Form B and therefore refer to the instructions on pages 7 to 9. Unlike Form B, however, the purpose of Form C is to update the information that you reported last year. On the far right hand side of Form C, there are three check boxes next to each employee's job information. Record 'X' in the box that applies to each employee.

Nature of Business: If you are completing the survey form for the first time, you must provide a description of the type of business you conduct. If your business activity has changed since the last survey, record a description in the place provided. Otherwise, leave the space blank.

NO CHG: Refers to no change. If there were no changes made to a job holder's record and they were still employed during the reference week, mark the no change box.

CHG: Refers to change. Mark the change box if any of the job holder's information has changed.

DEL: Refers to delete. Mark the delete box across from the name of all employees who were no longer employed by your business during the reference week.

Changing the Employees and Occupations Form

Please refer to page 14. This is an example of **Form C** modified according to the following instructions.

- I. Brian Adams was laid off during the reference week. Change his actual hours to **00.0** and normal hours to **99.9**. Record **'X'** in the **CHG** box.
- 2. Ruth Barker worked last year as a Sales Clerk, Retail Trade. During the year, she was promoted to Marketing Manager. As a consequence, her hours have increased. You should cross out her previous occupation, occupational code and hours and amend accordingly. Then record 'X' in the CHG box.
- 3. Edith Gordon works as a receptionist. During the year she was married; therefore, her surname changed. Cross out 'GORDON' and record 'SMITH'. During the last year, Mrs. Smith became a permanent resident certificate holder of Bermuda. Cross out 'NB' and record 'P'. Then record 'X' in the CHG box.
- 4. Morris King had left the business before the survey reference week began. Record **'X'** in the **DEL** box.

Government of Bermuda Statistics Act 2002(Clause 11)

Page (No. 3 of 3)

JOE NAME 230-0000

ES CONTACT PERSON: PHONE NO.: EMPLOYER NAME: ADDRESS:

ID NO.: 1234567

NO BX NO NAME business
NO STREET
NO PARISH
Retail Sale of Clothing and Footwear

NATURE OF BUSINESS:

	OEL					×
	9 9	×	×	(×	
boxes	NO CHG CHG DEL					
tick correct boxes						
tick co	SUMS P/T TU JOB				×	
	<u>\$</u> 2					
	OWN SUMS P/T					
	0					
	HA MS SO TA					
	ds s					
	ਸੈਂ Q					
	Benef					
	Grs Benefits Ann Inc AB CA	U		L	۵	щ
	Act Hrs. Norm Hrs. Grs	-50.0 99.9	40.0 45.0		25.0	40.0
	Act Hrs.	6.62 0.00	#0.9 45.0		25.0	0:0
	Sts	ON/ B	ADE B		# <u>~</u>	ω
S	Occupation Description	1320 MANAGER ADMINISTRATION/ B PERSONNEL	SALESCLERK, RETAIL TRADE B 40.9 45.0	MARKETING MANAGER	RECEPTIONIST	MANAGER/DIRECTOR/ MARKETING
NOIT	Code.	1320	1 25	1325	4226	1325
UPA	Race	Σ	-		7	4
000	Sex	Σ	ш		ட	Σ
"FORM C" EMPLOYEES & OCCUPATIONS	Date of Birth	1/9/1973	24/01/1992		31/03/1985	15/02/1963
ΕM		BRIAN	RUTH		ЕВПН	MORRIS
"FORM C"	Surname Forename	ADAMS BRIAN	BARKER RUTH		GORDON EDITH	KING MORRIS

The above details relating to the period Sunday, 25 August 2024 – Saturday, 31 August 2024 are correct to the best of my knowledge and belief.

NAME OF AUTHORISED SIGNATORY (Please Print) <u>Joe Name</u>

AUTHORIS

Joe Name AUTHORISED SIGNATORY DATE COMPLETED 25 / 09 / 2024

N.B. 1. This form must be completed and returned to the Department of Statistics by Monday, 21 October 2024
2. Columns for "Gross Annual Income" and "Benefits" apply to all companies.
*key to abbreviations: "AB" Annual Bonus, "CA" Car Allowance, "HA" Housing Allowance, "O" Other "MS" Mortage Subsidy, "SO" Stock Options, "TA" Travel Allowance, "O" Other

EMPLOYER DETAILS

Remember that if your business activity has changed since last year's reference week, record a description of the new activity in the 'Nature of Business' box at the top of form. For businesses with four or more job holders, the 'Nature of Business' box is on top of Form C.

Where the 'Contact Person' information is blank or no longer accurate, place the correct name in the space provided.

Finally, check the remaining empoyer details and correct them if necessary:

- Employer name / Trading name.
- Postal box or street address, parish and postal code.
- Telephone number.

Please refer to page 16 for answers to some frequently asked questions.

FREQUENTLY ASKED QUESTIONS

Situation: I have only two employees, do I still have to complete the survey?

Response: Yes, you still have to complete the survey.

Situation: If I am self-employed do I include myself as an employee?

Response: Yes, if you are self-employed you must include yourself along with any other employees you have.

Situation: I am a taxi permit holder but I do not drive a taxi myself. Do I include those who operate my taxi?

Response: If you own a taxi, please list all operators of your taxi.

Situation: My housekeeper lives in my home, do I need to include her?

Response: Households that employ live-in domestics like nannies, housekeepers or gardeners are required to include their employees in the survey data even if the job is only part-time.

Situation: One of my heavy equipment operators also cleans my business office in the evening after work. Should I include him twice?

Response: If an employee does more than one job then a separate record must be created for each job that he or she holds.

Situation: I used to be self-employed but now I work for someone else. I don't need to return your forms, do I?

Response: If you are no longer self-employed or if your business is no longer in existence, return your forms in the normal way but mark them 'No Longer Operating'.

Situation: My business still exists but I have suspended operations temporarily. Do I still need to return the survey forms?

Response: If the business still exists but has no employees at the present time and would have employees in the future, please return the forms with the words, 'No Employees' marked on them.

Situation: In July 2024 I laid off an employee for an indefinite time period. Should this post be classified as vacant?

Response: No, this post will be considered a filled job. You should adjust the actual hours of work to **00.0** and the normal hours of work to **99.9** on the employee record.

Situation: I do not know whether my business will reopen after the pandemic although it is unlikely. Should I mark my form as 'No Longer Operating' or 'No Employees'? Response: You should mark your form as 'No Employees'.

FOR FURTHER INFORMATION
Contact the Department of Statistics at 297-776 or employmentsurvey@gov.bm

