

Note for use: This form can be used when identifying suspected bonded labourers to insure that relevant information is captured from the victims and questions asked establish the existence of bonded labour.

Bonded Labour Identification Form

Name: Age: Gender: Date:						
	Full Name	Gender	Age	Facility	Escaped?	Contact Detail
Father						
Mother						
Husband/Wife						
Children						
Native Address Dis Taluk Dis Owner Name	trict St Contractor i	tate name				
Name and Address of the How long have you won	he Facility/Industry rked at the facility?					
Debt/Advance Did you receive any adv Amount_ Who gave you the debt		·		er/Contract	tor?	
For whom was it given? Are there any deductio How much does the Ov If the amount owed has	o ns as a result of the de vner/Contractor say th	ebt/advance at you curre	?ently ow	e?		_
Other obligation						
If you did not receive an Are you working for a d Did the Owner/Contract	lebt of a relative? If ye	s, whose? _				
Wages What wages were you p How much did the own How much money did y How often do you recei	er say he would pay yo ou actually receive in	ou? hand when	you wer	 e paid your	wages?	



Is the wage for your family or just for you? Provide the names of people who are included
What time do you begin work? What time do you finish work?
Do you have any days off?
Restriction of Freedoms
Freedom of Movement
Are you free to leave the facility with your family?
Are you free to travel to your native village with your entire family?
Are you free to go to the market with your entire family on any day you choose without supervision?
Have you ever tried to leave without permission from the Owner/Maestri? What happened if you did?
Freedom of Employment
Can you work for another employer, even if you still have a debt/advance owed?
Economic Freedom
Does the owner restrict what you can buy or sell?
Other Abuses
Have you or your family been threatened or verbally abused by the Owner/Maestri? Why?
What did he say?
Have you or your family been physically abused by the Owner/Maestri or his supervisors? Why?
What happened?
What injuries occurred?
Name of Labourer
Thumbprint/Signature of Labourer
Date: