

BLES SURVEY FORM 16 (SAMPLE ESTABLISHMENTS WITH NEW ADDRESSES)

Regional Supervisor: Accomplish in duplicate for each survey. Retain duplicate for file and transmit the original copy to BLES **not later than 20 days after the termination of field operations** in your region. The list should contain the names of establishments with new addresses but whose questionnaires have not been retrieved at the close of field operations.

NCR supervisor: Accomplish one copy for survey supervised and forward to the designated personnel for computerized status monitoring **within 10 days from the end of the period of delivery**. The list should contain the names of establishments with new addresses and those with new enumerators assigned.

This list is for sample establishments of: (encircle only one):	EHES OIS

EIN	Name of Sample Establishment	New Address (For ONCR, provide Address 1, Address 2 and Address 3; For NCR, provide Address 1 only)	For BLES Use (accomplish applicable columns only)		
			New GEO Code	New Supervisor	New Enumerator

DOLE Regional Office			BLES
Prepared by:		Noted by:	Prepared by:
Signature:_____	Signature: _____	Signature:_____	
Name: _____	Name:_____	Name:_____	
Position: _____	Position: IMSD Chief	Position:_____	
Date:_____	Date: _____	Date:_____	