

ER Sheet Data Entry Form

Basic Data GOVT. OF INDIA MINISTRY OF WATER RESOURCES BRAHMAPUTRA BOARD.

Officer ID No. Details

Service	CSS	Cadre		Sub Cadre		Id No.	
Select List Year (Allot Year)							

Name Details

Title	First Name	Middle Name	Sur Name	Initials
	BASANTA		BAITHA	E. Baitha
CSL No./SCSL No: (if known)				
Sex	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Date of Birth	Date of Retirement
			05-01-1964	31-12-2024
Community	S.C		Religion	HINDU
Father's Name	LATE- ASMAN BAITHA			

Birth Details

Birth Place	GUARA	Birth State/UT	BIHAR	Nationality	INDIAN
Birth District	BIHAR	Mother Tongue	Bhojpuri (Hindi)		
Domicile	BIHAR	Physically Handicap Status			
Blood Group	"O" + ve	Identification Marks	One cut mark on upper head.		

Marital Details

Marital Status	MARRIED	Spouse Name	Mrs SOVA BOTE DEVI
Spouse Nationality	Indian		

Joining Details

Source of Recruitment		Joining Date	1-07-1982	Retirement Details	31-12-2024
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

Remarks (if any)

Language Known

HINDI

Read

Write

Speak

Indian Languages Known

1

2

3

4

5

Foreign Lang. Known

1

2

3

HINDI

Assamese

Known

Known

Known

Known

Known

Known

Address Details

Permanant Address

VII - GURKA P.D. KATIYA

DIST GOPAL GONGA

City

Patapur

Gayah

Gopal gang

State/UT

BIHAR

Pin Code

841433

Present Contact Address

Gohai Bari Guwahati.

City

781029

State/UT

Assam

Pin Code

781029

Phone (Off)

Fax

Phone (Res)

Mob No

9706487132

E-Mail (Mandatory)

**Qualification** (Use extra photocopy sheets for multi qualifications, experience, training, awards details)

Qualification <i>Class - II</i>	Discipline	Specialization I
Year	Division	Specialization II
Institution	University	Place
		Country <i>Indian</i>
		<i>Gopal gangi Bihar</i>

**Experience**

Type of Posting	Level
Designation <i>P.W.C. Udhampur</i>	Present Position <i>P.W.C. Udhampur</i>
Ministry	Department <i>Public Works Dept</i>
Office <i>Guruchati Sub-Div</i>	Place <i>Guruchati</i>
Experience Subject	Period of Posting
Major	Minor
	From
	To

Note:-Refer the Annexure to fill above Major, Minor Subjects and below given training subject

**Training**

Training Year	Training Name	Training Subject
Level	Institute Name, Place	Field Visit Country
		Field Visit Place (within India)
Sponsoring Authority	Period of Training	Duration
	From	(in Weeks)
	To	
		Result
		Qualified
		Not Qualified

**Awards/Publications**

Type of Activity :	<input type="radio"/> Academic	<input type="radio"/> Non Academic
Activity Area	Activity Subject	Activity Title
Day	Month	Year
		Activity Description/Remarks
		Level

Note. (i) Concerned CSS officer is responsible for the correctness of information sent through ER Sheet proforma.

(ii) Subject to verification by the concerned administrative authorities.

Date : \_\_\_\_\_ Place : \_\_\_\_\_  
Information checked and verified - by \_\_\_\_\_

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*[Signature]*  
Signature of Officer

Section Officer	Ministry/Department
E-mail Id	Room No.
Phone No.	Wing No.
	Building Name