

ER Sheet Data Entry Form

**Basic Data**

**Employment Details**

Grade/Cadre	Sub-Cadre	Id No.	Retirement Date
Select Last Year (Allot Year)			

**Name Details**

Title	First Name	Middle Name	Sur Name	Initials
KARMAKAR	BITAY	KARMAKAR		<i>[Signature]</i>

CSL No /  
SCSL No: (if known)

Sex	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth	31-03-1962	Date of Retirement	31-03-2022
Community	LOHAR	Religion	HINDUISM		
Father's Name	SRI. ASHOK KARMAKAR				

**Birth Details**

Birth Place	Dibrugarh	Birth State/UT	Assam	Nationality	Indian
Birth District	Dibrugarh	Mother Tongue	Assamese		
Domicile	Assam	Physically Handicap Status	NIL		
Blood Group	O, +ve	Identification Marks	Black mole on the left side below eyes		

**Marital Details**

Marital Status	Married	Spouse Name	MRS. SANDHYA KARMAKAR
Spouse Nationality	Indian		

**Joining Details**

Source of Recruitment	Joining Date	16-03-1985	Retirement Details	31-03-2022
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**Departmental Examination Details**

Level	Year	Rank

Information to be filled on extra photocopy sheets for multi qualifications, experience, training, awards details

Discipline		Specialization	
HSLC Passed			
Year	Pass	CGPA	Specialization?
Institution	University	Place	Country

*Debrughat public High School*

Type of Posting		Level	
Designation		Present Position	
Ministry		Department	
Office		Place	
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	Result
	From To	(in Weeks)	<input type="radio"/> Qualified <input type="radio"/> 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	Level
Activity Description/Remarks			

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 \_\_\_\_\_  
*Bijay Kumar*  
 Signature of Officer

Section Officer	Ministry/Department
Room No.	Building Name
Phone No.	Wire No.

Language known

		Read	Write	Speak
Foreign Lang. Known	1			
	2			
	3			
	4			
	5			
Foreign Lang. Known	1			
	2			
	3			

Hindi, Bengali, Assamese

English

Address Details

Permanent Address	VNR-DEOBIL, MATBAON P.O. NAMSAI Dist. NAMSAI A.P.		City	NAMSAI (A.P)
	State/UT		Pin Code	792103
Present Contact Address	SATSAMGH NAGAR, MARK-I NAMSAI TOWN, (A.P)		City	NAMSAI (A.P)
	State/UT		Pin Code	792103
	Phone (Off)		Fax	
	Phone (Res)	918258827530	Mob No	9402483907
	E-Mail (Mandatory)			