

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre		Sub Cadre		Id No.	will be allotted by CS Division, LNB
Select List Year (Allot Year)							

Name Details

Title	First Name	Middle Name	Sur Name	Initials	
Mr.	FARUK	AHMED	MAZUMDER		
CSL No./ SCSL No: (if known)					
Sex	<input checked="" type="radio"/> Male <input type="radio"/> Female	Date of Birth	13.05.1961	Date of Retirement	31.05.2021
Community		General	Religion	Muslim	
Father's Name		Late Ishak Ali			

Birth Details

Birth Place	Kanakpur, Pt-II	Birth State/UT	Assam	Nationality	Indian
Birth District	Cachar	Mother Tongue		Bengali	
Domicile	Assam	Physically Handicap Status			
Blood Group	A +ve	Identification Marks			

Marital Details

Marital Status	Married	Spouse Name	Najma Begum
Spouse Nationality	Indian		

Joining Details

Source of Recruitment		Joining Date	12.11.84	Retirement Details	31.05.2021
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

Remarks (if any)

Language Known

		Read	Write	Speak
Indian Languages Known	1	Bengali	Fluent	Fluent
	2	Hindi	Limited	Limited
	3			
	4			
	5			
Foreign Lang. Known	1			
	2			
	3			

Address Details

Permanant Address	Kanakpur, Pt-II		City	Silchar
	State/UT	Assam	Pin Code	788,005
Present Contact Address	O/O the Executive Engineer, Barak Valley Division		City	
	State/UT	Assam	Pin Code	788,001
	Phone (Off)	3,842,230,454	Fax.	
	Phone(Res)		Mob No	9,706,378,532
	E-Mail (Mandatory)			

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

Qualification		Discipline		Specialization 1	
Year		Division		CGPA	
Institution		University		Place	
				Country	

Experience			
Type of Posting		Level	
Designation		Present Position	
Office Peon		Regular	
Ministry		Department	
Ministry of Water Resources		Brahmaputra Board	
Office		Place	
Barak Valley Division, Brahmaputra Board		Silchar	
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 : 7.10.15 Place : Silchar.

Information checked and verified - by

Fazuk Ahmed Mageshadas

Signature of Officer

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