

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
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Select List Year (Allot Year)

Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr.	Hanif		Ali	

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/>	Male	<input type="radio"/>	Female	Date of Birth	31.12.1962	Date of Retirement	31.12.2022
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Community	General	Religion	Muslim
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Father's Name: Mafizur Rahman

Birth Details

Birth Place	Niz kaurbaha	Birth State/UT	Assam	Nationality	Indian
Birth District	Kamrup (R)	Mother Tongue	Assamese		
Domicile	Assam	Physically Handicap Status			
Blood Group	AB +ve	Identification Marks	Black mole in right hand little		

Marital Details

Marital Status	Married	Spouse Name	Nurjahan Begum
Spouse Nationality	Indian		

Joining Details

Source of Recruitment		Joining Date	10.09.1983	Retirement Details	31.12.2022
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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	Assamese	Fluent	Fluent	Fluent
	2	Hindi	Limited	Limited	Limited
	3				
	4				
	5				
Foreign Lang. Known	1	English	Fluent	Limited	Limited
	2				
	3				
Address Details					
Permanant Address		Rangia ward No.-5, Stadium colony	City	Rangia	
		State/UT	Assam	Pin Code	
Present Contact Address		Same as above		City	
		State/UT	Assam	Pin Code	781.354
		Phone (Off)		Fax.	
		Phone(Res)		Mob No	8,876,058,227
		E-Mail (Mandatory)			

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)				
Qualification		Discipline		Specialization 1
Class-VIII				
Year	Division	CGPA	Specialization 2	
1,982				
Institution		University	Place	Country
Barajal High Madrasa				

Experience

Type of Posting		Level		
Designation		Present Position		
Khalasi		Regular		
Ministry		Department		
MoWR RD&GR, GOI		Brahmaputra Board		
Office		Place		
Guwahati Division		Basistha		
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	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.

Hanish Ali

Date :

Place :

Information checked and verified - by

Signature of Officer

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