

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre	Drilling Helper	Sub Cadre	Id No.	will be alerted by Division, LNB
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Select List Year (Allot Year)

Name Details

Title	First Name	Middle Name	Sur Name	Initials	J.Gogoi
Mr.	Jogeswar		Gogoi		J.Gogoi

CSL No./SCSL No: (if known)	
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Sex	<input checked="" type="radio"/>	Male	<input type="radio"/>	Female	Date of Birth	01.02.1966	Date of Retirement	31.01.2026
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Community	OBC	Religion	Hindu
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Father's Name	Late Bombeswar Gogoi
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Birth Details

Birth Place	Lakhimpur	Birth State/UT	Assam	Nationality	Indian
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Birth District	Lakhimpur	Mother Tongue	Assamese
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Domicile	Assam	Physically Handicap Status	
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Blood Group	B +ve	Identification Marks	
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Marital Details

Marital Status	Married	Spouse Name	Dimbeswar Gogoi
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Spouse Nationality	Indian
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Joining Details

Source of Recruitment	Drilling Helper	Joining Date	13.11.1993	Retirement Details	31.01.2026
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Departmental Examination Details

Level	Year	Rank
1		
2		
3		

...s (if any)

Language Known

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

Address Details

Permanant Address	Lowkuth, P.O- Batamari, Lakhimpur		City	Lakhimpur
	State/UT	Assam	Pin Code	787,001
Present Contact Address	Lakhimpur Division, Brahmaputra Board, North Lakhimpur		City	Lakhimpur
	State/UT	Assam	Pin Code	787,031
	Phone (Off)	232,307	Fax.	
	Phone(Res)		Mob No	7,896,236,431
	E-Mail (Mandatory)			

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

Qualification		Discipline		Specialization 1	
Clar X		SEBA			
Year	Division	CGPA	Specialization 2		
1,982					
Institution		University		Place	Country
Batamari High School		SEBA		Ghilamora	India

Experience

Type of Posting		Level			
OTHER		Other			
Designation		Present Position			
Drilling Helper		Regular			
Ministry		Department			
MOWR RD & GR		Brahmaputra Board			
Office		Place			
Lakhimpur Division		North Lakhimpur			
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 _____

[Signature]
Signature of Officer

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