

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre	Sub Cadre	Id No.	will be allotted by C.S Division, LNB
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Select List Year (Ailot
Year)

Name Details

Title	First Name	Middle Name	Sur Name	Initials
ALI	MAZAMIL		ALI	MA

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	01-07-1962	Date of Retirement	30-06-2022
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Community	General	Religion	Islam
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Father's Name
Sale - Nazim Ali

Birth Details

Birth Place	Belsore	Birth State/UT	Assam	Nationality	Indian
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Birth District	Nalbari	Mother Tongue	Assamese
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Domicile	Assam	Physically Handicap Status	
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Blood Group	AB (+ve)	Identification Marks	
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Marital Details

Marital Status	Married	Spouse Name	Mrs. Mehera Begam
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Spouse Nationality	Indian
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Joining Details

Source of Recruitment	Appointment	Joining Date	01-04-1982	Retirement Details	30-06-2022
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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	Assame	Fluent	Fluent
	2	Hindi	Fluent	Fluent
	3	Bengali	Limited	Limited
	4			
	5			
Foreign Lang. Known	1			
	2			
	3			

Address Details

Permanant Address	vill+p.o. Belson DIST- Malbari		City	Malbari
	State/UT	ASSAM	Pin Code	781304
Present Contact Address	DO		City	Malbari
	State/UT	ASSAM	Pin Code	781304
	Phone (Off)		Fax	
	Phone(Res)		Mob No 8822347286	
	E-Mail (Mandatory)			

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

Qualification	Discipline	Specialization 1
Class - V		
Year	Division	CGPA
		Specialization 2
Institution	University	Place
		Country

Experience			
Type of Posting		Level	
Designation		Present Position	
PWC - Khalasi		PWC - Khalasi	
Ministry		Department	
Ministry of Water Resources		Brahmaputra Board	
Office		Place	
Nalbari Division		Nalbari	
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	
2011	(D) Group non metric employee	Field watch	
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.

Date: _____ Place: Nalbari

Information checked and verified - by _____

✓ Md. Muzmil. AL
Signature of Officer

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