

## ER Sheet Data Entry Form


### Basic Data

#### Officer ID No. Details

Service	CSS	Cadre	Accounts	Sub Cadre		Id No.	will be alerted by CSDivision,LNB
---------	-----	-------	----------	-----------	--	--------	-----------------------------------

Select List Year (Allot Year) 1995

#### Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr	RAMANANDA		DEBNATH	

CSL No./ SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	Dec 21, 1970	Date of Retirement	Dec 31, 2030
-----	---------------------------------------	------------------------------	---------------	--------------	--------------------	--------------

Community	OBC	Religion	Hindu
-----------	-----	----------	-------

Father's Name Lt. Premananda Debnath

#### Birth Details

Birth Place	Barpeta Road	Birth State/UT	Assam	Nationality	Indian
-------------	--------------	----------------	-------	-------------	--------

Birth District	Barpeta	Mother Tongue	Bengali
----------------	---------	---------------	---------

Domicile	ASSAM	Physically Handicap Status	
----------	-------	----------------------------	--

Blood Group	O +ve	Identification Marks	Cut mark on left leg
-------------	-------	----------------------	----------------------

#### Marital Details

Marital Status	Un married	Spouse Name	
----------------	------------	-------------	--

Spouse Nationality

#### Joining Details

Source of Recruitment	SELECTION GRADE	Joining Date	May 24, 1995	Retirement Details	31.12.2030
-----------------------	-----------------	--------------	--------------	--------------------	------------

#### Departmental Examination Details

	Level	Year	Rank
1	Others	2000	1
2			
3			

Remarks (if any) Departmental examination for the post of Divisional Accountant

Language Known					
			Read	Write	Speak
Indian Languages Known	1	ASSAMESE	FLUENT	FLUENT	FLUENT
	2	BENGALI	FLUENT	FLUENT	FLUENT
	3	HINDI	FLUENT	FLUENT	FLUENT
	4				
	5				
Foreign Lang. Known	1	ENGLISH	FLUENT	FLUENT	FLUENT
	2				
	3				
<b>Address Details</b>					
Permanent Address		Chandanpur,Ward No.8	City	Barpeta Road	
		State/UT	Assam	Pin Code	781315
Present Contact Address		Bongaon,Beltola College Road	City	Guwahati	
		State/UT	Assam	Pin Code	781028
		Phone (Off)	-	Fax.	-
		Phone(Res)	-	Mob No	9435303503
		E-Mail (Mandatory)	Rdn0121@gmail.com		

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)					
Qualification		Discipline		Specialization 1	
B.Com		Commerce		Banking	
Year	Division		CGPA	Specialization 2	
1993	Second Division		-		
Institution		University		Place	Country
B.H.College		Gauhati University		Guwahati	India
Experience					
Type of Posting			Level		
CADRE			Assistant		
Designation			Present Position		
Junior Accountant			Regular		
Ministry			Department		
Ministry of Water Resources			Brahmaputra Board		
Office			Place		
Finance & Accounts Wing			Basistha, Guwahati-29		
Experience Subject			Period of Posting		
Major		Minor		From	To
				May 24, 1995	
<b>Note:-Refer the Annexure to fill above Major, Minor Subjects and below given training subject</b>					
Training					
Training Year	Training Name			Training Subject	
2002	ITMS, New Delhi			Accounting & Finance for all	
Level	Institute Name, Place		Field Visit Country	Field Visit Place (within India)	
	ITMS, New Delhi		-	Panaji, Goa-	
Sponsoring Authority	Period of Training		Duration	Result	
Brahmaputra Board	From	To	( in Weeks)	<input checked="" type="radio"/>	Qualified
	Dec 12, 2002	Dec 15, 2002	1	<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:

Information checked and verified – by

Signature of Officer

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