

ER Sheet Data Entry Form

Basic Data									
Officer ID No.									
Service	CSS	Cadre		Sub Cadre		Io No.			
Select List Year (Allot Year)									
Name Details									
Title	First Name	Middle Name	Sur Name						
Hajawika	Ulepa		Hajawika			Initial	Sri Ulepa Hajawika		
CSL No / SCSL No: (If Known)									
Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	30-09-1957	Date of Retirement	30-09-2010			
Community		Assamese	Religion	Hindu					
Father's Name			Late Hajawika Hajawika						
Birth Details									
Birth Place		Ulepa	Birth State/ UT	Assam	Nationality	Indian			
Birth District		Ulepa	Mother Tongue	Assamese					
Domicile		Ulepa	Physically Handicap Status						
Blood Group		O+	Identification Marks			One black spot mark Left leg			
Marital Details									
Marital Status		MARRIED	Spouse Name		MRS Manon Hajawika				
Spouse Nationality			Indian						
Joining Details									
Source of Recruitment		Joining Date		04-07-1980	Retirement Details		30-09-2010		
Departmental Examination Details									
	Level				Year		Rank		
1									
2									
3									

Remarks (if any):

Language Known		Read	Write	Speak
Indian Language Known	1	Assamese	Yes	Yes
	2	Bengali	Yes	Yes
	3			
	4			
	5			
Foreign Language Known	1			
	2			
	3			

Address Details				
Permanent Address	[Handwritten Address]		City	[Handwritten City]
	State/UT	Assam	Pin Code	[Handwritten Pin Code]
Present Contact Address	[Handwritten Address]		City	[Handwritten City]
	State/UT	[Handwritten State]	Pin Code	[Handwritten Pin Code]
	Phone (Off)	[Handwritten No]	Fax	
	Phone (Res)	[Handwritten No]	Mob. No	[Handwritten No]
	* Man (Mandatory)			

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

Qualification	Discipline		Specialization 1
1976			
Year	Division	CGPA	Specialization 2
1976			
Institution	University	Place	Country
Krishna Bidyapith High School Phulbari, Nalbari		Dekh F. A. K. M. P. K.	India

Experience		Type of Posting	Level
		Field	Group-C
		Designation	Present Position
		P. K. K. K.	Junior Engineer
		Ministry	Department
		Ministry of Social Welfare & Rehabilitation	Brahmaputra Board
		Office	Place
		Nagaon Sub-Division	Nagaon
Experience Subject		Major	Minor
		From	To

Note:- Refer the Annexure to fill above Major, Minor Subjects and below given training subject

Training	NIL			Training Subject
Training Year	Training Name			
Level	Institute Name, Place		Field Visit Country	Field Visit Place (within India)
Sponsoring Authority	Period of Training	Duration	Result	Qualified
Training Year	Training Name		Training Subject	
Level	Institute Name, Place		Field Visit Country	Field Visit Place (within India)

Awards/Publications					
Type of activity		Academic	Non Academic		
Activity Area / Activity / Subject		Activity Title			
Day	Month	Year	Activity Description	Remarks	Level
<p>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.</p>					
Date	Place	Signature	Signature		
Information checked and verified by					
Section Officer		Ministry/Department			
E-mail ID		Room No	Building Name		
Phone No		Wing No			