

## ER Sheet Data Entry Form

| Basic Data                       |                                       |                              |                            |           |                    |                                       |                                     |  |  |
|----------------------------------|---------------------------------------|------------------------------|----------------------------|-----------|--------------------|---------------------------------------|-------------------------------------|--|--|
| Officer ID No. Details           |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| Service                          | CSS                                   | Cadre                        |                            | Sub Cadre |                    | Id No.                                | will be alerted by CS Division, LNB |  |  |
|                                  |                                       |                              |                            |           |                    | 661                                   |                                     |  |  |
| Select List Year (Allot Year)    |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| Name Details                     |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| Title                            | First Name                            | Middle Name                  | Sur Name                   |           |                    |                                       |                                     |  |  |
| Stu                              | Askar                                 | Ali                          | Laskar                     |           |                    |                                       |                                     |  |  |
| Initials                         |                                       | Alaskar                      |                            |           |                    |                                       |                                     |  |  |
| CSL No./SCSL No: (if known)      |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| Sex                              | <input checked="" type="radio"/> Male | <input type="radio"/> Female | Date of Birth              | 30.09.56  | Date of Retirement | 30.9.16                               |                                     |  |  |
| Community                        |                                       | muslim                       |                            | Religion  |                    | Islam                                 |                                     |  |  |
| Father's Name                    |                                       | Late Hayat Ali Laskar        |                            |           |                    |                                       |                                     |  |  |
| Birth Details                    |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| Birth Place                      | Silchar                               | Birth State/UT               | Assam                      |           | Nationality        | Indian                                |                                     |  |  |
| Birth District                   | cachar (Assam)                        |                              | Mother Tongue              |           |                    | Bengali                               |                                     |  |  |
| Domicile                         | Assam                                 |                              | Physically Handicap Status |           |                    | no.                                   |                                     |  |  |
| Blood Group                      | (B) +ve                               |                              | Identification Marks       |           |                    | one mole just right side of the neck. |                                     |  |  |
| Marital Details                  |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| Marital Status                   | married                               |                              | Spouse Name                |           |                    | Mrs. Salma Begam Laskar               |                                     |  |  |
| Spouse Nationality               | Indian.                               |                              |                            |           |                    |                                       |                                     |  |  |
| Joining Details                  |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| Source of Recruitment            | Selection                             |                              | Joining Date               | 23/09/89  |                    | Retirement Details                    | 30/9/16.                            |  |  |
| Departmental Examination Details |                                       |                              |                            |           |                    |                                       |                                     |  |  |
|                                  | Level                                 | Year                         |                            |           |                    | Rank                                  |                                     |  |  |
| 1                                |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| 2                                |                                       |                              |                            |           |                    |                                       |                                     |  |  |
| 3                                |                                       |                              |                            |           |                    |                                       |                                     |  |  |

|                        |   |             |              |              |         |
|------------------------|---|-------------|--------------|--------------|---------|
| Marks (if any)         |   |             |              |              |         |
| Language Known         |   |             |              |              |         |
|                        |   | <b>Read</b> | <b>Write</b> | <b>Speak</b> |         |
| Indian Languages Known | 1 | Bengali     | Fluent       | Fluent       | Fluent  |
|                        | 2 | Hindi       | Limited      | Limited      | Limited |
|                        | 3 | English     | Some         | Some         | Some    |
|                        | 4 | Assamese    | Some         | Some         | Some    |
|                        | 5 |             |              |              |         |
| Foreign Lang. Known    | 1 |             |              |              |         |
|                        | 2 |             |              |              |         |
|                        | 3 |             |              |              |         |

**Address Details**

|                         |                                                                    |              |          |            |
|-------------------------|--------------------------------------------------------------------|--------------|----------|------------|
| Permanant Address       | vill & p.o. ullarkrishmapuz<br>part- F, p.s. Silchar, Dist. Cachar |              | City     | Silchar    |
|                         | State/UT                                                           |              | Pin Code | 788006     |
| Present Contact Address | Senai sub division, B/ Board<br>under Barak valley division.       |              | City     | Silchar    |
|                         | State/UT                                                           | Assam        | Pin Code | 788006     |
|                         | Phone (Off)                                                        | 03842-230454 | Fax.     | -          |
|                         | Phone (Res)                                                        |              | Mob No   | 9401210704 |
|                         | E-Mail (Mandatory)                                                 |              |          |            |

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

|                                    |               |               |  |                  |         |
|------------------------------------|---------------|---------------|--|------------------|---------|
| Qualification                      |               | Discipline    |  | Specialization 1 |         |
| H.S.L.C. passed                    |               | Agt.          |  |                  |         |
| Year                               | Division      | CGPA          |  | Specialization 2 |         |
| 1976                               | 3rd. Division |               |  |                  |         |
| Institution                        |               | University    |  | Place            | Country |
| Govt. Boys H.S. School<br>Silechar |               | S.E.B.A Board |  | Silechar         | India.  |

**Experience**

|                                      |  |                   |                   |      |    |
|--------------------------------------|--|-------------------|-------------------|------|----|
| Type of Posting                      |  | Level             |                   |      |    |
| pwc (Khalasi)                        |  |                   |                   |      |    |
| Designation                          |  | Present Position  |                   |      |    |
| pwc. (Khalasi)                       |  | Khalasi           |                   |      |    |
| Ministry                             |  | Department        |                   |      |    |
| ministry of water resources          |  | Brahmaputra Board |                   |      |    |
| Office                               |  | Place             |                   |      |    |
| Sonai Sub-Division Brahmaputra Board |  | Silechar - I      |                   |      |    |
| 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.

Date : \_\_\_\_\_ Place : \_\_\_\_\_  
Information checked and verified - by \_\_\_\_\_

*Askar Ali Laskar*  
Signature of Officer

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