

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre		Sub Cadre		Id No.	will be allotted by CS Division, LNB
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Select List Year (Allot Year)

Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr.	ANANDA	RAM	BARUAH	

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	01.11.1957	Date of Retirement	31.10.2017
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Community

General

Religion

Hindu

Father's Name

LATE NANDIRAM BARUAH

Birth Details

Birth Place	PAHUKATA	Birth State/UT	Assam	Nationality	INDIAN
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Birth District

NAGAON

Mother Tongue

ASSAMESE

Domicile

Physically Handicap Status

Blood Group

O -ve

Identification Marks

A MOLE ON RIGHT CHEEK

Marital Details

Marital Status	Married	Spouse Name	MRS GAYATRI BARUAH
Spouse Nationality	INDIAN		

Joining Details

Source of Recruitment		Joining Date	28.06.1983	Retirement Details	
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

Remarks (if any)	
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Language Known

			Read	Write	Speak
Indian Languages Known	1	ASSAMESE	Fluent	Fluent	Fluent
	2	HINDI	Limited	Limited	Limited
	3	BENGALI	Limited	Limited	Limited
	4				
	5				
Foreign Lang. Known	1	ENGLISH	Limited	Limited	Limited
	2				
	3				

Address Details

Permanant Address	VILL-PAHUKATA P.O.-AIBHETI		City	NAGAON
	State/UT	Assam	Pin Code	782,002
Present Contact Address	PANIGAON, KALIBARI		City	NAGAON
	State/UT	Assam	Pin Code	782,003
	Phone (Off)	3,672,254,923	Fax.	3,672,254,923
	Phone(Res)		Mob No	9,435,046,080
	E-Mail (Mandatory)	bbrdnagaon1959@yahoo.in		

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)					
Qualification		Discipline		Specialization 1	
DIPLOMA IN ENGG					
Year	Division		CGPA	Specialization 2	
1,982	2nd				
Institution		University		Place	Country
NAGAON POLYTECHNIC		BOARD OF TECH. EDUCATION		NAGAON	INDIA

Experience

Type of Posting		Level	
Designation		Present Position	
Ministry		Department	
OF WATER RESOURCES		RIVER DEVELOPMENT & GANGA REJUVENATION BRAHMA	
Office		Place	
BRAHMAPUTRA BOARD, NAGAON		NAGAON	
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 : 15.09.2015 Place : Nagaon

Information checked and verified - by

Signature of Officer

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