

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre	NON-MINISTERIAL	Sub Cadre	KHALASI	Id No.	will be allotted by CS Division, LNS
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Select List Year (Allot Year)

Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr	BABUL		KALITA.	Babalita

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

O.B.C.

Religion

HINDU

Father's Name

Lt. NOGEN KALITA

Birth Details

Birth Place	SALMARA MAJULI	Birth State/UT	ASSAM.	Nationality	INDIAN.
Birth District	JORHAT.	Mother Tongue	ASSAMESE.		
Domicile	ASSAM.	Physically Handicap Status			
Blood Group	B + ve	Identification Marks	CUT MARK at Right Leg.		

Marital Details

Marital Status	MARRIED	Spouse Name	TARAMAI KALITA.
Spouse Nationality	INDIAN		

Joining Details

Source of Recruitment	B. Board O.O No. 13 dt 13.5.81	Joining Date	26-05-1981	Retirement Details	June 30th 2022.
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

marks (if any)

Language Known

		Read	Write	Speak
Indian Languages Known	1	ASSAMESE	FLUENT	FLUENT
	2	HINDI	LIMITED	LIMITED
	3			
	4			
	5			
Foreign Lang. Known	1	ENGLISH	NO	LIMITED
	2			
	3			

Address Details

Permanant Address	SALMARA P.O.		City	JORHAT.
	State/UT	ASSAM.	Pin Code	785110
Present Contact Address	GARMUR NA-PAM P.O. J.E.C.		City	JORHAT.
	State/UT	ASSAM.	Pin Code	785007.
	Phone (Off)	03775273698	Fax.	
	Phone(Res)		Mob No	08474875019
	E-Mail (Mandatory)			

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

Qualification		Discipline		Specialization 1	
CLASS - VII					
Year	Division	CGPA	Specialization 2		
1979					
Institution	University	Place	Country		
SALMARA M.E. SCHOOL.		SALMARA	INDIA.		
Experience					
Type of Posting			Level		
Designation			Present Position		
Ministry			Department		
MOWR, RD & GR.			BRAHMAPUTRA BOARD.		
Office			Place		
MAJULI SUB-DIVISION - III			MAJULI, KAMALABARI.		
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		
2012	TRAINING OF W/C GROUP-D		PAY BAND-1 W/C GROUP-D EMPLOYEES		
Level	Institute Name, Place	Field Visit Country	Field Visit Place (within India)		
Sponsoring Authority	Period of Training		Duration	Result	
	From	To	(in Weeks)	<input checked="" type="radio"/> Qualified <input type="radio"/> Not Qualified	
	22-03-2012	25-03-2012	4(FOUR) DAYS.		

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: *Sri Babul Das*

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