

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre		Sub Cadre	KHALASI	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.	BANAMALI		KALITA	B. Kalita

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male <input type="radio"/> Female	Date of Birth	31.12.1961	Date of Retirement	31.12.2021
Community	General	Religion	Hindu		

Father's Name
LATE RAMESWAR KALITA

Birth Details

Birth Place	SANDHA	Birth State/UT	Assam	Nationality	INDIAN
Birth District	NALBARI	Mother Tongue	ASSAMESE		
Domicile	Assam	Physically Handicap Status			
Blood Group	O +ve	Identification Marks	Burn spot on right hand		

Marital Details

Marital Status	Married	Spouse Name	MRS. AKAN KALITA
Spouse Nationality	INDIAN		

Joining Details

Source of Recruitment	KHALASI	Joining Date	28.12.1983	Retirement Details	31.12.2021
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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	Limited	Limited	Fluent
	2				
	3				
	4				
	5				
Foreign Lang. Known	1				
	2				
	3				

Address Details

Permanant Address	VILL- DALUA, P.O. GHAGRAPAR, NALBARI	City	
	State/UT Assam	Pin Code	781369
Present Contact Address	VILL- DALUA, P.O. GHAGRAPAR, NALBARI	City	
	State/UT Assam	Pin Code	781369
	Phone (Off)	Fax	
	Phone(Res)	Mob No	
	E-Mail (Mandatory)		

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

Qualification		Discipline		Specialization 1	
Class - III					
Year	Division	CGPA	Specialization 2		
Institution	University	Place	Country		
Jamtala High School		Jamtala	India		

Experience

Type of Posting		Level			
Designation		Present Position			
KHALASI		Regular			
Ministry		Department			
Ministry of Water Resources, RD & GR		Brahmaputra Board			
Office		Place			
Guwahati Division		Guwahati			
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 : 17/9/15 Place : Guwahati
 Information checked and verified - by Bomoni Hotta
Signature of Officer

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