

## ER Sheet Data Entry Form

## Basic Data

## Officer ID No. Details

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

## Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr.	Bhabananda		Kalita	B.Kalita

CSL No./  
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	01-02-1956	Date of Retirement	31-01-2016
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Community	General	Religion	Hindu
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Father's Name  
Late Ramhari Kalita

## Birth Details

Birth Place	Bhotanta Maytara	Birth State/UT	Assam	Nationality	INDIAN
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Birth District	Barpeta	Mother Tongue	Assamese
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Domicile	Assam	Physically Handicap Status	
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Blood Group	A +ve	Identification Marks	Cut mark on left hand
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## Marital Details

Marital Status	Married	Spouse Name	Banadevi Kalita
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Spouse Nationality	INDIAN
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## Joining Details

Source of Recruitment		Joining Date	31.05.1983	Retirement Details	31.01.2016
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## Departmental Examination Details

Level	Year	Rank
1		
2		
3		

Remarks (if any)

Language Known

		Read	Write	Speak	
Indian Languages Known	1	Assamese	Fluent	Fluent	Fluent
	2	Hindi	Limited	Limited	Limited
	3				
	4				
	5				
Foreign Lang. Known	1	English	Limited	Limited	Limited
	2				
	3				

**Address Details**

Permanant Address

Bhotanta Maytara, City Barpeta

State/UT Assam Pin Code

Present Contact Address

Brahmaputra Board, Basistha, City Guwahati

State/UT Assam Pin Code 781,029

Phone (Off) Fax.

Phone(Res) Mob No 9,401,059,343

E-Mail (Mandatory)

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

Qualification		Discipline		Specialization 1	
Class 8th passed					
Year	Division	CGPA		Specialization 2	
Institution		University		Place	Country
Sahid Rawtamadan H.Scher				Barpeta	India

**Experience**

Type of Posting		Level			
Designation		Present Position			
O/P		Regular			
Ministry		Department			
MINISTRY OF WATER RESOURCES, RD&GR		Brahmaputra Board			
Office		Place			
Secretariat		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 : 14.09.2015 Place : GUWAHATI

Information checked and verified - by

*Bhabananda Kalita*  
Signature of Officer

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