

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre	Khalasi	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.	Bhaban		Dutta.	Bhaban Dutta

CSL No./
SCSL No: (if known)

Sex	<input type="radio"/> Male	<input type="radio"/> Female	Date of Birth	15.06.1963	Date of Retirement	30.06.2023
Community	O.B.C		Religion	Hindu.		

Father's Name
Babu. Dandidhan Dutta.

Birth Details

Birth Place	Dhemaji	Birth State/UT	Assam	Nationality	Indian
Birth District		Mother Tongue	Assamese.		
Domicile	Assam.	Physically Handicap Status			
Blood Group	O Positive.	Identification Marks	One black spot in face.		

Marital Details

Marital Status	Married	Spouse Name	Mrs Reena Dutta.
Spouse Nationality	Indian.		

Joining Details

Source of Recruitment	Khalasi	Joining Date	15.09.1983	Retirement Details	30.06.2023
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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
	2	Hindi	Fluent	Fluent
	3			
	4			
	5			
Foreign Lang. Known	1	English	Fluent	Fluent
	2			
	3			

Address Details

Permanant Address	3 NO ward . Mayang Narah Road P.O Dhemaji . Dist. Dhemaji Assam .		City	Dhemaji
	State/UT		Pin Code	787057
Present Contact Address	Lakhipur Division . Bishkupur Board North Lakhipur - 787031		City	Lakhipur .
	State/UT	Assam	Pin Code	787057
	Phone (Off)	03752 - 232307	Fax.	
	Phone(Res)	99571 59057	Mob No	99571 59057
	E-Mail (Mandatory)			

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

Qualification		Discipline		Specialization 1	
CLASS VIII		SEBA			
Year		Division		CGPA	
1979					
Institution		University		Place	
Janata H.S. School		SEBA		Dhemaji	
				Country	
				India	

Experience

Type of Posting		Level			
Designation		Present Position			
Khasi		Regular			
Ministry		Department			
MOWARD & BR		Berkhampur Board.			
Office		Place			
Lakhimpur Division		North Lakhimpur.			
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	
Sponsoring Authority		Period of Training		Duration	
		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 _____

Shabana Khatun
Signature of Officer

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