

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Server	CSS	Cadre		Sub cadre		ID No	will be allotted by CS division. LNB
--------	-----	-------	--	-----------	--	-------	--------------------------------------

Select List Year (Allot year)

Name Details

Title First Name Middle Name Surname

SRIMATI BIMA KUMARI Initial *श्रीमती बिमा कुमारी*

CSL No./ SCSL No. (if known)

Sex	Male <input type="radio"/>	Female <input checked="" type="radio"/>	Date of Birth	30-11-1965	Date of Retirement	30-11-2025
-----	-------------------------------	--	---------------	------------	--------------------	------------

Community

NEPALI

Religion

HINDUSIM

Father's Name

SRI SALIGRAM SARMA

Birth Details

Birth Place	SHILLONG	Birth Stat/UT	MEGHALAYA	Nationality	India
-------------	----------	---------------	-----------	-------------	-------

Birth District	MEGHALAYA	Mother Tongue	NEPALI
----------------	-----------	---------------	--------

Domicile	MEGHALAYA	Physically Handicap Status
----------	-----------	----------------------------

Blood Grup	B + Ve.	Identification Marks	BLACK SPOT AT NOSE
------------	---------	----------------------	--------------------

Marital Status

Marital Status	WIDOW	Spouse Name
----------------	-------	-------------

Spouse Nationality	Indian
--------------------	--------

Joining Details

Source of Recruitment	Joining Data	11/9/1996	Retirement Details	31-08-2026
-----------------------	--------------	-----------	--------------------	------------

Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

Remarks (if any)					
Language Known					
		Read		Write	Speak
Indian Languages Known	Assamese		Yes	Yes	Yes
	Hindi		Yes	Yes	Yes
Foreign Languages Known					

Address Details				
Permanent Address	Vill. NATUN BATIPARA P.O.		City	
	MANIARI TINIALI			GUWAHATI
	State/UT	Assam	Pin Code	781125
Permanent Address	Vill. NATUN BATIPARA P.O.		City	
	MANIARI TINIALI			GUWAHATI
	State/UT	ASSAM	Pin Code	781125
	Phone(Of)		Fax	
	Phone(R)		Mob No	8720904154
	E-Mail (Mandatory)			

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

Qualification		Discipline		Specialization 1	
CLASS -VII					
Year	Division	CGPA	Specialization 1		
Institution	University	Place	County		
			INDIA		

Experience			
Type of Posting		Level	
Designation		Present Position	
Office chowkider		Office chowkider	
Ministry		Department	
MINISSTRY OF WAATER RESOURCES		BRAHMAPUTRA BOARD	
Office		Place	
MIRZA SUB-DIVISION		MIRZA	
Experience Subject		Period of Posting	
Major	Minor	From	To

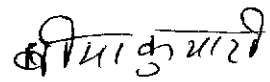
Note:- Refer the Annexure to fill above Major, Minor Subjects and below given training subject

Training			
Training Year	Training Name	Training Subject	
2011	D. EMPLOYEE	D. EMPLOYEE	
Level	Institue 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
	24-11-2009 23-12-2009	2 DAYS	<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	Level
Activity Description/ Remarks			

Note (i) Concerned CSS officer is responsible for the correctness of information sent through ER Sheet proforma.

(ii) Subject to verification by the concerned adminisstrative authorities.



Date : Place:

Information checked and verified by

Signature of Officer

Section Officer	Ministry/Depaartment
E- mail ID	Room No Building Name
Phone No	Wing No