

## ER Sheet Data Entry Form

## Basic Data

## Officer ID No. Details

Service	CSS	Cadre		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.	Hari	Charan	Baishya		
CSL No./ SCSL No: (if known)					
Sex	<input checked="" type="radio"/> Male <input type="radio"/> Female	Date of Birth	14.04.1956	Date of Retirement	30.04.2016
Community		General	Religion	Hindu	
Father's Name		Late Nauti Ram Baishya			

## Birth Details

Birth Place	AKhia	Birth State/UT	Assam	Nationality	Indian
Birth District	Nalbari	Mother Tongue		Assamese	
Domicile	Assam	Physically Handicap Status			
Blood Group	O +ve	Identification Marks		one spot on the right arm	

## Marital Details

Marital Status	Married	Spouse Name	Mrs. Bina Baishya
Spouse Nationality	Indian		

## Joining Details

Source of Recruitment		Joining Date	21.11.1983	Retirement Details	30.04.2016
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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	Fluent	Fluent	Fluent
	2				
	3				
	4				
	5				
Foreign Lang. Known	1	English	Limited	Limited	Limited
	2				
	3				

Address Details

Permanant Address	Mahanagar path, Lalmati, Borsajai		City	Guwahati
	State/UT	Assam	Pin Code	781,029
Present Contact Address	Mahanagar path, Lalmati, Borsajai		City	Guwahati
	State/UT	Assam	Pin Code	781,029
	Phone (Off)		Fax.	
	Phone(Res)		Mob No	8,876,735,533
	E-Mail (Mandatory)			

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)				
Qualification		Discipline		Specialization 1
HSLC				
Year	Division	CGPA	Specialization 2	
1,976	third			
Institution		University	Place	Country
R.N. Chaudhari high School			Mukalmua	India

Experience			
Type of Posting		Level	
Designation		Present Position	
σ/p		Regular	
Ministry		Department	
MoWR, 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 givan 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	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 administrative authorities.

Date : 06/09/15 Place : Guwahati

Information checked and verified - by

*Hara Charan Baisya*  
Signature of Officer

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