

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

| | | | | | | |
|---------|-----|-------------|-------------|-------|--------|---------------------|
| Service | CSS | Cadre | Organized | Sub | Id No. | will be allotted by |
| | | Engineering | BRAHMAPUTRA | Cadre | | CSDivision LNE |
| | | ing | BOARD | | | |

Select List Year (Allot Year)

Name Details

| | | | |
|-------|------------|-------------|-----------|
| Title | First Name | Middle Name | Sure Name |
|-------|------------|-------------|-----------|

KHAN HAMID

Initials

KHAN

CSI No /

SCSL No: (if known)

| | | | | | | |
|-----|---------------------------------------|------------------------------|---------------|------------|--------------------|------------|
| Sex | <input checked="" type="radio"/> Male | <input type="radio"/> Female | Date of Birth | 01.09.1956 | Date of Retirement | 31.08.2016 |
|-----|---------------------------------------|------------------------------|---------------|------------|--------------------|------------|

Community

ASSAMESE MUSLIM

Father's Name

LATE RAJID KHAN

Birth Details

| | | | | | |
|----------------|-----------|----------------|-------|-------------|----------|
| Birth Place | DIBRUGARH | Birth State/UT | ASSAM | Nationality | INDIAN |
| Birth District | DIBRUGARH | Mother Tongue | | | ASSAMESE |

Domicile

Physically Handicap Status

NO

Blood Group

'O' GROUP

Identification Marks

CUT MARK ON FORE
HEAD

Marital Details

Marital Status

MARRIED

Spouse Name

MRS. MANUWARA BEGUM

Spouse Nationality

INDIAN

Joining Details

| | | | | | | |
|-----------------------|---------------------------------|-----------|--------------|---------------------|--------------------|------------|
| Source of Recruitment | Direct Recruitment on selection | BR. BOARD | Joining Date | 01.04.1982 (F.N) | Retirement Details | 31.08.2016 |
|-----------------------|---------------------------------|-----------|--------------|---------------------|--------------------|------------|

Departmental Examination Details

Level

Year

Rank

1

2

3

Remarks (if any)

Language Known

| | | Read | Write | Speak |
|------------------------|---|----------|-------|-------|
| Indian Languages Known | 1 | HINDI | ✓ | ✓ |
| | 2 | ENGLISH | ✓ | ✓ |
| | 3 | ASSAMESE | ✓ | ✓ |
| | 4 | | | |
| | 5 | | | |
| Foreign Lang. Known | 1 | ENGLISH | ✓ | ✓ |
| | 2 | | | |
| | 3 | | | |

Address Details

| | | | | |
|-------------------------|---|-------|-----------|------------|
| Permanent Address | PALTANBAJAR PO. JALAN NAGAR | City | DIBRUGARH | |
| | State/UT | ASSAM | Pin Code | 786005 |
| Present Contact Address | DIBRUGARH SUB-DIVN. BRAHMAPUTRA BOARD CHIRING CHAPARI | City | DIBRUGARH | |
| | State/UT | ASSAM | Pin Code | 786001 |
| | Phone (Off) | | Fax | |
| | Phone (Res) | | Mob No | 9859284062 |
| | E-Mail (Mandatory) | | | |

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

Qualification

Discipline

Specialization 1

H.S.L.C PASSED

Year

Division

CCPA

Specialization 2

1972

First Class

NA

Institution

University /

Place

Country

BORBORUAH H.E.S.

DIBRUGARH

DIBRUGARH

INDIA

Experience

Type of Posting

Level

OTHER

Designation

S.A.

Present Position

SECTION ASSISTANT

SECTION ASSISTANT

Ministry

Department

MINISTRY OF WATER RESOURCES

BRAHMAPUTRA BOARD

Office

Place

DIBRUGARH SUB-DIVN.

DIBRUGARH

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

2002-2003

SATC, KRL, PKD (ROAD) AMPARI TRAINEE SECTION ASSISTANT
GHTY,

Level

Institute Name, Place

Field Visit Country

Field Visit Place (within India)

Sponsoring Authority

Period of Training

Duration

Result

From

To

(in Weeks)

Qualified

Not Qualified

Awards/Publications

Type of Activity :

Academic

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 : 06.11.2015

Place: Roing (Arunachal Pradesh)

Information checked and verified - by

DIBRUGARH

Hamid Khan

Signature of Officer

Section Officer

Ministry/Department

E-mail Id

Room No.

Building Name :

Phone No.

Wing No.