

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)

1984

Name Details

Title	First Name	Middle Name	Sur Name	Initials
MR	HARI	PRASAD	BOR GOHAIN	

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	01-05-1959	Date of Retirement	
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Community

Assamese

Religion

Father's Name

Late Bapuram Borgohain

Birth Details

Birth Place	Jalukanihore	Birth State/UT	Assam	Nationality	Indian
Birth District	Jorhat	Mother Tongue	Assamese		
Domicile		Physically Handicap Status			
Blood Group	"OB" +	Identification Marks	"Chest - " front side		

Marital Details

Marital Status	Married	Spouse Name	Mrs Bidyawati Borgohain
Spouse Nationality	Indian		

Joining Details

Source of Recruitment	Govt of Indian Brahmaputra Board	Joining Date	01-10-1984	Retirement Details	30-4-2020
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

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

Qualification		Discipline		Specialization 1	
Read up to Class 8					
Year	Division	CGPA	Specialization 2		
Institution		University		Place	Country
Jalukami lensi HS School					India

Experience					
Type of Posting			Level		
Khaluse			Kh		
Designation			Present Position		
Kh			Kh		
Ministry			Department		
M.B.W.R.R.D & G.R			Brahmaputra Board		
Office			Place		
Majuli Sub-Division NO II Br Board.			Kamala leaci Majuli		
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 :

Place :

Information checked and verified - by

Signature of Officer

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

Remarks (if any)

Language Known

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

Address Details

Permanant Address	Jalekani keoi Jhain gona P.O. Jalekani		City	Jorhat
	P.S. Jitabor, Dist, Jorhat (ASSAM)			
	State/UT		Pin Code	785630
Present Contact Address			City	Majuli
	State/UT		Pin Code	785106
	Phone (Off)		Fax.	
	Phone(Res)		Mob No	8822279949
	E-Mail (Mandatory)			