

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

| | | | | | | | |
|---------|-----|-------|-----------------|-----------|--------|--------|-------------------------------------|
| Service | CSS | Cadre | Non-Ministerial | Sub Cadre | Driver | Id No. | will be alerted by CS Division, LNB |
|---------|-----|-------|-----------------|-----------|--------|--------|-------------------------------------|

Select List Year (Allot Year) 1990

Name Details

| Title | First Name | Middle Name | Sur Name | Initials |
|-------|------------|-------------|----------|-------------|
| Mr. | Hianta | | Handique | H. Handique |

CSL No./
SCSL No: (if known)

Sex Male Female Date of Birth Oct 1, 1961 Date of Retirement Sep 30, 2021

Community OBC Religion Hindu

Father's Name Late Laba Ram Handique

Birth Details

| | | | | | |
|----------------|---------------|----------------------------|----------------------|-------------|--------|
| Birth Place | Vill Dighalia | Birth State/UT | Assam | Nationality | Indian |
| Birth District | Dibrugarh | Mother Tongue | Assamese | | |
| Domicile | Assam | Physically Handicap Status | | | |
| Blood Group | O +ve | Identification Marks | One Mole on left arm | | |

Marital Details

| | | | |
|--------------------|---------|-------------|---------------|
| Marital Status | Married | Spouse Name | Mina Handique |
| Spouse Nationality | Indian | | |

Joining Details

| | | | | | |
|-----------------------|-----------------|--------------|--------------|--------------------|---------------|
| Source of Recruitment | SELECTION GRADE | Joining Date | Dec 25, 1985 | Retirement Details | Sept 30, 2021 |
|-----------------------|-----------------|--------------|--------------|--------------------|---------------|

Departmental Examination Details

| Level | Year | Rank |
|-------|------|------|
| 1 | | |
| 2 | | |
| 3 | | |

Remarks (if any)

Language Known

| | | Read | Write | Speak | |
|------------------------|---|----------|---------|---------|--------|
| Indian Languages Known | 1 | Assamese | Fluent | Fluent | Fluent |
| | 2 | Hindi | Fluent | Limited | Fluent |
| | 3 | English | Limited | Limited | No |
| | 4 | | | | |
| | 5 | | | | |
| Foreign Lang. Known | 1 | | | | |
| | 2 | | | | |
| | 3 | | | | |

Address Details

| | | | | |
|-------------------------|---|---------------------------|----------|---------------|
| Permanant Address | Vill. Dighaliya, P.O. Dighaliya, P.S. Tengakhat | | City | |
| | State/UT | Assam | Pin Code | 786,101 |
| Present Contact Address | Majuli Division, Brahmaputra Board | | City | Kamalabari |
| | State/UT | Assam | Pin Code | 785,106 |
| | Phone (Off) | 3,775,273,698 | Fax. | |
| | Phone(Res) | | Mob No | 9,678,592,645 |
| | E-Mail (Mandatory) | bbmajulidivision@gmailcom | | |

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

| | | | | | |
|---------------------|----------|------------|--|------------------|---------|
| Qualification | | Discipline | | Specialization 1 | |
| Class IX | | | | | |
| Year | Division | CGPA | | Specialization 2 | |
| 1,977 | | | | | |
| Institution | | University | | Place | Country |
| Belbari High School | | | | Dighalia | India |

Experience

| | | | | | |
|--------------------|--|-------------------|--|------|----|
| Type of Posting | | Level | | | |
| | | | | | |
| Designation | | Present Position | | | |
| | | | | | |
| Ministry | | Department | | | |
| | | | | | |
| Office | | Place | | | |
| | | | | | |
| 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 : 28/9/15 Place : Kamalabari
 Information checked and verified - by  Signature of Officer

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