

ER Sheet Data Entry Form

Basic Data

Officer's ID No. Details

Service	CSS	Cadre	Sub Cadre	Id No.	will be alerted by CS Division, LNB
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Select List Year (Allot Year)	1990
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Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr.	JAGAT	MOHAN	GOSWAMI	J. Goswami

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	01/03/1965	Date of Retirement	28/02/25
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Community: General Religion: Hindu

Father's Name: Late Krishna Kanta Goswami

Birth Details

Birth Place	Kamalabari	Birth State/UT	Assam	Nationality	Indian
Birth District	Jorhat	Mother Tongue	Assamese		
Domicile	Assam	Physically Handicap Status			
Blood Group	B +ve	Identification Marks	Black mole at left elbow		

Marital Details

Marital Status	Married	Spouse Name	Mrs Lakhima Goswami
Spouse Nationality	Indian		

Joining Details

Source of Recruitment	SELECTION GRADE	Joining Date	11/07/1990	Retirement Details	28/02/25
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

marks (if any)

Language Known

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

Address Details

Permanant Address	Vill- Upper Katani Gaon P.O. Kamalabari Majuli Dist Jorhat,		City	
	State/UT	Assam	Pin Code	785,106
Present Contact Address	Shankar Path P.O.- Hatigaon		City	Guwahati
	State/UT	Assam	Pin Code	781,038
	Phone (Off)		Fax.	
	Phone(Res)		Mob No	9,435,208,328
	E-Mail (Mandatory)	jmg.majuli@gmail.com		

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

Qualification		Discipline		Specialization 1
Three years diploma		Civil Engineering		
Year	Division	CGPA	Specialization 2	
1,987	1st class			
Institution	University	Place	Country	
HRH The P.O.W.E.T	DTE	gorhat	India	

Experience

Type of Posting		Level		
OTHER				
Designation		Present Position		
		Regular		
Ministry		Department		
MoWR, RD & GR, GOI		Brahmaputra Board		
Office		Place		
Guwahati Division		Basistha		
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

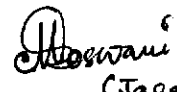
Awards/Publications

Type of Activity :		<input type="radio"/> Academic	<input type="radio"/> Non Academic
Activity Area		Activity Subject	Activity Title
Day	Month	Year	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 : _____ Place : _____
Information checked and verified - by _____


(Jagat Mohan Goswami)
Signature of Officer

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