

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.	Naren	Chandra	Malakar	N.M.B.K.

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	05.08.1962	Date of Retirement	31.08.2022
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Community

S.C

Religion

Hindu

Father's Name

Late Jagat Malakar

Birth Details

Birth Place	Pashim Nowkata	Birth State/UT	Assam	Nationality	Indian
Birth District	Kamrup (R)	Mother Tongue	Assamese		
Domicile	Assam	Physically Handicap Status			
Blood Group	O +ve	Identification Marks	Cut mark on right leg		

Marital Details

Marital Status	Married	Spouse Name	Mrs. Pratibha Malakar
Spouse Nationality	Indian		

Joining Details

Source of Recruitment		Joining Date	10.06.1983	Retirement Details	30.06.2022
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

marks (if any)	
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Language Known

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

Address Details

Permanant Address	Vill- Pashim Nowkata, Goreswar		City	
	State/UT	Assam	Pin Code	781,029
Present Contact Address	Brahmaputra Board colony, Basistha		City	Guwahati
	State/UT	Assam	Pin Code	781,029
	Phone (Off)		Fax.	
	Phone(Res)		Mob No	9,859,012,125
	E-Mail (Mandatory)			

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)							
Qualification		Discipline			Specialization 1		
Class- VI							
Year	Division		CGPA		Specialization 2		
Institution		University		Place		Country	
Nowkata High School				Nowkata		India	
Experience							
Type of Posting				Level			
pump operator							
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	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 _____

Narayan Ch. Mohanta
Signature of Officer

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