

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details 630

Service	CSS	Cadre		Sub Cadre		Id No.	630	will be alerted by CS Division, LNB
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Select List Year (Allot Year)

Name Details

Title	First Name	Middle Name	Sur Name	Initials
MR	NIKHIL	DATTA	MAZUMDER	N.D.M

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	19-08-1958	Date of Retirement	31-08-2018
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Community	GENERAL	Religion	HINDUISM
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Father's Name 2: T. NIHAR DATTA MAZUMDER

Birth Details

Birth Place	IRONGMARA	Birth State/UT	ASSAM	Nationality	INDIAN
Birth District	CACHAR	Mother Tongue	BENGALI		
Domicile		Physically Handicap Status			
Blood Group	'O' + VE	Identification Marks	one cut mark on the right thumb.		

Marital Details

Marital Status	MARRIED	Spouse Name	MAHA DATTA MAZUMDER
Spouse Nationality			

Joining Details

Source of Recruitment	By interview	Joining Date	03-10-1989	Retirement Details	31-08-2018
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

M. D. S.

Remarks (if any)					
Language Known					
		Read	Write	Speak	
Indian Languages Known	1	BANGLA	Fluent	fluent	fluent
	2	Hindi	- do -	- do -	- do -
	3	Assami	- do -	- do -	- do -
	4	English	- do -	- do -	- do -
	5				
Foreign Lang. Known	1				
	2				
	3				
Address Details					
Permanant Address		VILL:- IRONGMARA P.O:- IRONGMARA	City	Silehar	
		State/UT	Assam	Pin Code	788011
Present Contact Address			City		
		State/UT	Assam	Pin Code	788011
		Phone (Off)	03842-230454	Fax.	
		Phone(Res)		Mob No	9706169502
		E-Mail (Mandatory)			

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

Qualification		Discipline		Specialization 1	
Passed H.S.L.C. Exam.					
Year	Division	CGPA		Specialization 2	
1975	Third Division				
Institution		University		Place	Country
P.C. BARDALANGA HIGH SCHOOL				CACHAR	

Experience

Type of Posting		Level			
Designation		Present Position			
P.W.C. Khalasi		P.W.C. Khalasi			
Ministry		Department			
Ministry of Water Resources.		Brahmaputra Board			
Office		Place			
Sileha Sub-Division		Sileha -			
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 _____

Neelil Datta Mazumdar
Signature of Officer

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