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Select List		(Allot Y	ear)													
Name Det		st Nam														
Title		Middle Name Sure Na					ame	me								
MR		CHETIA						<i>†</i>	Initials So Posour							
CSL No																
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Sex	Male Comm) Fei	male	Date o	of Birth	1 2	1/01	<u> </u>	959	Date	of Re	etiren	nent	31	101/2019
, (C															
Father's	Nam	е	1	ATÉ	MAH	END	€A	Cal	 HF	TIA						
Birth Detail	s		<u> </u>		<u>'</u>				-, -					···-		
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Marital Status MARRIE D					D	Spouse Name						MANJU CHETIA				
Spouse N	lationa	ality	IN	DIAN			<u> </u>	,			•		·			
Joining De	tails	· .				•										
Source of Direct Recruitment on selection										ireme etails						
Departmen	tal Ev	aminat	ion D	otoile										**		
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Language Known							
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Foreign Lang.	1		_ [7			
Known	1 2				-		
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Address Details				<u> </u>	<u> </u>		
Permanent Address		Vill: Harlakh be	₩i.	City	GOG AA LIVILL		
		P.O:-Gogamin	kh		GOGAMUKH		
DIST: DHEMAJ	١	P.O:-Gogamin State/UT	ASSAM	Pin Code	787056		
Present Contact				City			
Address		-Do -			-		
		01 / //					
		State/UT		Pin Code			
		Phone (Off)		Fax.			
		Phone(Res)		Mob No	0841399047		
		E-Mail (Mandatory)					

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Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)												
Qualifica	tion		Discipline						Specialization 1			
Class IX			ALL SUBJECT									
Year			Division		CGPA			Specialization 2				
1972			t Class	-								
Institution			rersity		Place		Co	Country				
MINGHANG TH	(IBAL H.	. 2										
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OTHER												
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OFFICE	PEON				OFFICE PEON							
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Note:-Refer the An	nexure to 1	ili above i	Major, Minor S	Subjects a	ind belo	w given	trainii	ng subjec	<u>:t</u>			
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Awards/Publicat	ions		O 4 == d==				N	A I :				
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Day Month	Year	ACU	vity Descripti	ai KS	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: Roing (Arunachal Pradesh) Signature of Officer												

Ministry/Department

Room No.

Wing No.

Section Officer

E-mail Id Phone No. Building Name :