

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre	ENGINEERING	Sub Cadre	CIVIL	Id No.	will be allotted by CS Division, LNB
Select List Year (Allot Year)							516 (2009)

Name Details

Title	First Name	Middle Name	Sur Name	Initials	
Mr. <input type="checkbox"/>	RAJENDRA		PRASAD	R	
CSL No./ SCSL No: (if known)					
Sex	<input checked="" type="radio"/> Male <input type="radio"/> Female	Date of Birth	30/11/1957	Date of Retirement	20/11/2017
Community		General <input type="checkbox"/>	Religion	Hindu <input type="checkbox"/>	
Father's Name		BHATTU MAHTO			

Birth Details

Birth Place	NANAND	Birth State/UT	Bihar <input type="checkbox"/>	Nationality	INDIAN
Birth District	NALANDA	Mother Tongue		HINDI	
Domicile	Bihar <input type="checkbox"/>	Physically Handicap Status		<input type="checkbox"/>	
Blood Group	O +ve <input type="checkbox"/>	Identification Marks		Cut mark in left elbow	

Marital Details

Marital Status	Married <input type="checkbox"/>	Spouse Name	UMA KUMARI
Spouse Nationality	INDIAN		

Joining Details

Source of Recruitment	SELECTION GRAD <input type="checkbox"/>	Joining Date	01/03/1983	Retirement Details	30/11/2017
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Departmental Examination Details

Level	Year	Rank
1	Others <input type="checkbox"/> 1990	PASSED
2	<input type="checkbox"/>	
3	<input type="checkbox"/>	

Remarks (if any)

Language Known

		Read	Write	Speak	
Indian Languages Known	1	HINDI	Fluent <input type="checkbox"/>	Fluent <input type="checkbox"/>	Fluent <input type="checkbox"/>
	2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foreign Lang. Known	1	ENGLISH	Fluent <input type="checkbox"/>	Fluent <input type="checkbox"/>	Fluent <input type="checkbox"/>
	2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Address Details

Permanant Address	NIRMALA KUNJ,F.NO-302,KHAJPURA BAILEY ROAD		City	PATNA
	State/UT	Bihar <input type="checkbox"/>	Pin Code	800014
Present Contact Address	O/O ASSTT.EXECUTIVE ENGINEER BRAHMAPUTRA BOARD, PANDAPARA		City	JALPAIGURI
	State/UT	West Bengal <input type="checkbox"/>	Pin Code	735101
	Phone (Off)	03561277645	Fax.	03561277645
	Phone(Res)		Mob No	9475248591
	E-Mail (Mandatory)	rajendrprasadnanand1957@gmail.com		

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

Qualification		Discipline		Specialization 1	
B. SC. ENGINEERING		CIVIL		PRESTRESS CONCRETE	
Year		Division		Specialization 2	
1979(A)/1981		1ST.		67.333%	
Institution		University		Place	
BIT, SINDRI		RANCHI		RANCHI	
				INDIA	

Experience

Type of Posting		Level	
OTHER <input type="checkbox"/>		Other <input type="checkbox"/>	
Designation		Present Position	
Asstt. Director <input type="checkbox"/>		Regular <input type="checkbox"/>	
Ministry		Department	
MOWR.GR&RM		BRAHMAPUTRA BOARD	
Office		Place	
SUB-DIVISION		SIMITANG, JALPAIGURI	
Experience Subject		Period of Posting	
Major		Minor	
WAATER RESOURCES WORKS		2006	
		CONTD.	

Note:-Refer the Annexure to fill above Major, Minor Subjects and below givan training subject

Training

Training Year		Training Name		Training Subject	
Level <input type="checkbox"/>		Institute Name, Place		Field Visit Country	
Sponsoring Authority		Period of Training		Duration	
		From To		(in Weeks)	
				Result	
				<input type="radio"/> Qualified <input type="radio"/> Not Qualified	

Awards/Publications

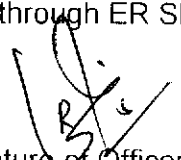
Type of Activity :			<input type="radio"/> Academic		<input type="radio"/> Non Academic	
Activity Area			Activity Subject		Activity Title	
<input type="checkbox"/>			Activity Description/Remarks		Level	
Day Month Year					<input type="checkbox"/>	

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 : 29/08/2015 Place : Jalpaiguri

Information checked and verified - by


Signature of Officer

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