

## 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) 1985

## Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr.	Sapam Tomba		Singh	

CSL No./  
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	01.03.1966	Date of Retirement	29.02.2026
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Community	General	Religion	Hindu
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Father's Name	Late Sapam Chaoba Singh
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## Birth Details

Birth Place	Langthabal lep	Birth State/UT	Manipur	Nationality	Indian
Birth District	Imphal West	Mother Tongue	Manipuri		
Domicile	Manipur	Physically Handicap Status			
Blood Group	A +ve	Identification Marks	One small mole at nose		

## Marital Details

Marital Status	Married	Spouse Name	Mrs.S. Rashi Devi
Spouse Nationality	Indian		

## Joining Details

Source of Recruitment		Joining Date	19.07.1985	Retirement Details	29.02.2026
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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	Manipuri	Fluent	Fluent
	2	Hindi	Limited	Fluent
	3			
	4			
	5			
Foreign Lang. Known	1	English	Limited	Limited
	2			
	3			

Address Details

Permanant Address	Langthabal Lep Awang Leikai		City	Imphal
	State/UT	Manipur	Pin Code	795,001
Present Contact Address	Uripok, Khoisnam leikai		City	Imphal
	State/UT	Manipur	Pin Code	795,001
	Phone (Off)		Fax.	
	Phone(Res)		Mob No	9,612,056,545
	E-Mail (Mandatory)	S. Tomba Singh @ G.mail. com.		

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

Qualification		Discipline		Specialization 1	
Class - VIII					
Year	Division	CGPA		Specialization 2	
1,982					
Institution		University		Place	
Ironmeijrao				Langthabal Lep	
				Country	
				India	

**Experience**

Type of Posting		Level			
Designation		Present Position			
SLP		Regular			
Ministry		Department			
Water Resources		Brahmaputra Board			
Office		Place			
Manipur Sub-Division, Brahmaputra Board		Imphal			
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	
		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 : 23/9/2015 Place : Imphal  
Information checked and verified - by

S. Tomber Singh.  
Signature of Officer

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