

ER Sheet Data Entry Form

Basic Data OF SRI SUNIL HAZRIKA

Officer ID No. Details

Service	CSS	Cadre	'c'	Sub Cadre	Id No.	706	will be alerted by CS Division, LNB
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Select List Year (Allot Year)

1983

Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr.	SUNIL		HAZARIKA	Shazarika

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	30-9-1966	Date of Retirement	30-9-2026
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Community

Assamese

Religion

Hinduism

Father's Name

late Bhuku Nath Hazarika.

Birth Details

Birth Place	Sibsagar	Birth State/UT	Assam	Nationality	Indian.
Birth District	Sibsagar.	Mother Tongue	Assamese.		
Domicile	Assam	Physically Handicap Status			
Blood Group	A+	Identification Marks	Right side leg one cut mark.		

Marital Details

Marital Status	Married	Spouse Name	Mr's Rina Hazarika
Spouse Nationality			

Joining Details

Source of Recruitment	SF DIC pasikat.	Joining Date	31-12-1983	Retirement Details	30-9-2026
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

Remarks (if any)

Language Known

		Read	Write	Speak
Indian Languages Known	1	Assamese	✓	✓
	2	Hiadhi	✓	✓
	3	English	✓	✓
	4			
	5			
Foreign Lang. Known	1			
	2			
	3			

Address Details

Permanant Address	vill :- paliphukan Road P.O- Sibsagar Dist:- Sibsagar		City	Sibsagar
	State/UT	Assam	Pin Code	785662
Present Contact Address	North Guwahati Division Brahmaputra Board Rudreswar, GHY-30		City	
	State/UT	Assam	Pin Code	781031
	Phone (Off)		Fax	
	Phone(Res)		Mob No	9859459271
	E-Mail (Mandatory)			

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

Qualification		Discipline		Specialization 1	
MIN					
Year	Division	CGPA		Specialization 2	
1981	NIL				
Institution		University		Place	Country
TOWN H.S. School.				Sibsagan	India

Experience

Type of Posting		Level	
Mechanical Helper			
Designation		Present Position	
Mechanical Helper		Same.	
Ministry		Department	
WATER RESOURCES		Brahmaputra Board	
Office		Place	
North Guwahati Division		North Guwahati	
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)
			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
Day	Month	Year	Level
Activity Description/Remarks			

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 _____ Signature of Officer _____

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