

ER Sheet Data Entry Form						
<b>Name of Organization</b> : CENTRAL WATER AND POWER RESEARCH STATION, PUNE						
<b>Employee No.</b> :						
<b>Service</b>	CCS	<b>Designation</b>	Photographer	<b>Sub Cadre</b>		
<b>Joining Date</b> : 06 NOV 2015						
<b>Name Details</b>						
<b>Title</b>	<b>First Name</b>	<b>Middle Name</b>	<b>SurName</b>			
Mr.	Aditya	Dilip	Awale	Initials		
<b>Identity Card NO.:</b> 1901/15						
<b>Sex</b>	Male	<b>Date Of Birth</b>	15.11.89	<b>Date of Retirement</b>	30.11.49	
<b>Community</b>	Maratha	<b>Religion</b>	Hindu			
<b>Father's Name</b>	Dilip Vishnu Awale					
<b>Birth Details</b>						
<b>Birth Place</b>	Pune	<b>Birth State/ UT</b>	Maharashtra	<b>Nationality</b>	Indian	
<b>Birth District</b>	Pune	<b>Mother Tongue</b>	Marathi			
<b>Domicile</b>	Maharashtra	<b>Physically Handicap Status</b>	Nil			
<b>Blood Group</b>	O+ve	<b>Identification Marks</b>	Birthmark on right side of waist			
<b>Marital Details</b>						
<b>Marital Status</b>	unmarried	<b>Spouse Name</b>	N.A.			
<b>Joining Details</b>						
<b>Source of Recruitment</b>	CWPRS	<b>Joining Date</b>	06.11.15	<b>Retirement Date</b>	30.11.49	
<b>Departmental Examination Details (If applicable)</b>						
	<b>Level</b>	<b>Year</b>	<b>Rank</b>			
1						
2						
3						
<b>Remarks (if any)</b>						
<b>Languages known</b>						
	<b>Name of Language</b>	<b>Read</b>	<b>Write</b>	<b>Speak</b>		
Indian Languages Known	1 Marathi	Yes	Yes	Yes		
	2 Hindi	Yes	Yes	Yes		
	3 English	Yes	Yes	Yes		

Foreign Languages Known	1			
	2			
	3			

**Details of deputation (if applicable)**

Name of the Office	Post held at that time in parent office	Name of post (selected for deputation)	Period of deputation	
			Since	From

**Details of Foreign Visit**

Sl. No.	Place of Visit	Date of visit	Post held at that time	Whether it is a personal or official visit	Details of visit

**Transfer/Posting Detail (if applicable)**

Place	Period of posting	
	Since	From

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

Qualification	Discipline	Specialization 1	
<b>B.Com</b>	-	-	
Year	Division	CGPA/ % Marks	Specialization 2
Institution	University	Place	Country
	-	<b>Pune</b>	<b>India</b>

**Experience**

Type of Posting	Level	
<b>On Probation</b>	<b>Group c</b>	
Designation	Present Position	
<b>Photographer</b>	<b>Photographer</b>	
Ministry	Department	
<b>Water Resources, RD&amp;GR</b>	<b>Water Resources</b>	
Office	Place	
<b>CWPRS</b>	<b>Khadakwasla, Pune</b>	
Experience Subject	Period of Posting	
Major	Minor	
	From	To

*Note: -Refer the Annexure to fill above Major, Minor Subjects and below given training subject (minimum 1 week & above)*

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)	
<b>Awards/Publications: nil</b>					
Type of Activity:			Academic	Non Academic	
Activity Area		Activity Subject		Activity Title	
Day		Month	Year	Activity Description/Remarks	Level

Note: (i) Concerned CCS Officer is responsible for the correctness of information sent through ER Sheet proforma.

(ii) Subject to verification by the concerned administrative authorities.

Date : 19.01.2016

Place : Pune

Information checked and verified – by

Signature of Officer

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