

| ER Sheet Data Entry Form   |                    |                             |  |                           |                  |  |
|--|--------------------|-----------------------------|--|---------------------------|------------------|--|
| <b>Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE</b> |                    |                             |  |                           |                  |  |
| <b>Employee No. :1216</b>  |                    |                             |  |                           |                  |  |
| <b>Service</b>   | CCS                | <b>Designation</b>          | MTS  |                           | <b>Sub Cadre</b> |  |
| <b>Joining Date :01.08.2001</b>  |                    |                             |  |                           |                  |  |
| <b>Name Details</b>  |                    |                             |  |                           |                  |  |
| <b>Title</b>   | <b>First Name</b>  | <b>Middle Name</b>          | <b>SurName</b>   |                           | <b>Initials</b>  |  |
| Mr.  | Tanaji             | Anna                        | Bhagat   |                           |                  |  |
| <b>Identity Card No. :</b>   |                    |                             |  |                           |                  |  |
| <b>Sex</b>   | Male               | <b>Date Of Birth</b>        | 25.02.1960   | <b>Date of Retirement</b> | 28.02.2020       |  |
| <b>Community</b>   | General            |                             | <b>Religion</b>  | Hindu                     |                  |  |
| <b>Father's Name</b>   | Anna Eknath Bhagat |                             |  |                           |                  |  |
| <b>Birth Details</b>   |                    |                             |  |                           |                  |  |
| <b>Birth Place</b>   | Khanapur           | <b>Birth State/ UT</b>      | Maharashtra  | <b>Nationality</b>        | Indian           |  |
| <b>Birth District</b>  | Sangli             |                             | <b>Mother Tongue</b>   | Marathi                   |                  |  |
| <b>Domicile</b>  | Sangli             |                             | <b>Physically Handicap Status</b>  | Not applicable            |                  |  |
| <b>Blood Group</b>   | O+                 | <b>Identification Marks</b> | A Black mole 2.5 cm from Neple at U.O.clock (2) A black mole 1.5 cm below right ear. |                           |                  |  |
| <b>Marital Details</b>   |                    |                             |  |                           |                  |  |
| <b>Marital Status</b>  | Married            | <b>Spouse Name</b>          | Rekha Tanaji Bhagat  |                           |                  |  |
| <b>Spouse Nationality</b>  | Indian             |                             |  |                           |                  |  |
| <b>Joining Details</b>   |                    |                             |  |                           |                  |  |
| <b>Source of Recruitment</b>   | CWPRS              | <b>Joining Date</b>         | 01.08.2001   | <b>Retirement Date</b>    | 28.02.2020       |  |
| <b>Departmental Examination Details (If applicable)</b>                      |                    |                             |  |                           |                  |  |
|  | <b>Level</b>       | <b>Year</b>                 | <b>Rank</b>  |                           |                  |  |
| 1  |                    |                             |  |                           |                  |  |
| 2  |                    |                             |  |                           |                  |  |
| 3  |                    |                             |  |                           |                  |  |

|                         |                  |             |              |              |
|-------------------------|------------------|-------------|--------------|--------------|
| Remarks (if any)        |                  |             |              |              |
| <b>Languages known</b>  |                  |             |              |              |
|                         | Name of Language | <b>Read</b> | <b>Write</b> | <b>Speak</b> |
| Indian Languages Known  | 1 Marathi        | Fluent      | Fluent       | Fluent       |
|                         | 2 Hindi          | Fluent      | Limited      | Limited      |
|                         | 3                |             |              |              |
|                         | 4                |             |              |              |
|                         | 5                |             |              |              |
| Foreign Languages Known |                  |             |              |              |
|                         | 1 English        | Limited     | Limited      | Limited      |
|                         | 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 |
| Not applicable     |   |  |                      |      |

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 |
|----------------|----------------|---------------|------------------------|--|------------------|
| Not applicable |                |               |                        |  |                  |

Transfer/Posting Detail (if applicable)

| Place          | Period of posting |      |
|----------------|-------------------|------|
|                | Since             | From |
| Not applicable |                   |      |

| <b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b> |            |                        |                  |
|--|------------|------------------------|------------------|
| Qualification  | Discipline |                        | Specialization 1 |
| 10 <sup>th</sup> Class   |            |                        |                  |
| Year   | Division   | CGPA/ % Marks          | Specialization 2 |
| 1978   |            |                        |                  |
| Institution  | University | Place                  | Country          |
|  |            |                        | India            |
| <b>Experience</b>  |            |                        |                  |
| Type of Posting : Regular  |            | Level                  |                  |
|  |            |                        |                  |
| Designation : MTS  |            | Present Position : MTS |                  |
|  |            |                        |                  |
| Ministry : MOWR, RD&GR   |            | Department : SED       |                  |
|  |            |                        |                  |
| Office : CWPRS, Pune   |            | Place: khadakwasla     |                  |
|  |            |                        |                  |
| Experience Subject   |            | Period of Posting      |                  |
| Major  | Minor      | From                   | To               |
|  |            |                        |                  |

|   |                       |                    |                              |                                  |               |
|---|-----------------------|--------------------|------------------------------|----------------------------------|---------------|
| <i>Note:-Refer the Annexure to fill above Major, Minor Subjects and below given training subject (minimum 1 week &amp; above)</i> |                       |                    |                              |                                  |               |
| 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)                      | Qualified     |
|   |                       |                    |                              |                                  | Not Qualified |
| <b>Awards/Publications</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 : 17.06.2015

Place : Khadakwasla, Pune-24

Information checked and verified – by

Signature of Officer

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