

## ER SHEET DATA ENTRY FORM

**Name of Organization** : CENTRAL WATER AND POWER RESEARCH STATION, PUNE

**Employee No.** : E1079

<b>Service</b>	CCS	<b>Cadre</b>	Group `C`	<b>Sub Cadre</b>	Multi Task Staff
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**Joining Date** :03.06.1994

### Name Details

<b>Title</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Surname</b>		
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Shri	Jayram	Sakharam	Bhalchim		
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### Identity Card No.

:1288/11

<b>Sex</b>	Male	Date Of Birth	01.06.1970	Date of Retirement	31.05.2030
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Community	ST	Religion	Hindu
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**Father's Name** : Sakharam Mahadu Bhalchim

### Birth Details

Birth Place	Amboli	Birth State/ UT	Maharashtra	Nationality	Indian
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Birth District	Pune	Mother Tongue	Marathi
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Domicile	Maharashtra	Physically Handicap Status	--NA--
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Blood Group	O+ve	Identification Marks	Black mole on Chest
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### Marital Details

Marital Status	Married	Spouse Name	Geeta
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Spouse Nationality	Indian
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### Joining Details

Source of Recruitment	CWPRS	Joining Date	03.06.1994	Retirement Date	31.05.2030
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Departmental Examination Details (If applicable)

	Level	Year	Rank
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1			
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2			
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3			
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Remarks (if any)	
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<b>Languages known</b>				
	Name of Language	<b>Read</b>	<b>Write</b>	<b>Speak</b>
Indian Languages Known	Marathi	√	√	√
2	Hindi	√	√	√
3				
4				
5				
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

<b>Qualification</b> (Use extra photocopy sheets for multi qualifications, experience, training, awards details)					
Qualification		Discipline		Specialization 1	
g <sup>th</sup>					
Year	Division	CGPA/ % Marks	Specialization 2		
1988					
Institution	University	Place	Country		
<b>Experience</b>					
Type of Posting			Level		
Regular			Group `C`		
Designation			Present Position		
MTS			MTS		
Ministry			Department		
Of Water Resources			PH-II		
Office			Place		
CWPRS			Khadakwasla		
Experience Subject			Period of Posting		
Major		Minor	From	To	
Note:-Refer the Annexure to fill above Major, Minor Subjects and below given training subject <b>(minimum 1 week &amp; above)</b>					
<b>Training</b>					
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 :

Place :

Information checked and verified – by

Signature of Officer

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