

**ER Sheet Data Entry Form**

| <b>Basic Data</b>                |  |                                 |               |                            |   |                    |                                       |  |  |
|----------------------------------|--|---------------------------------|---------------|----------------------------|---|--------------------|---------------------------------------|--|--|
| Officer ID No. Details           |  |                                 |               |                            |   |                    |                                       |  |  |
| Service                          | CSS                                      | Cadre                           |               |                            | Sub Cadre                               | Id No.             | Will be allocated by CS Division, LNB |  |  |
| Select List Year (Allot Year)    |  |                                 |               |                            |   |                    |                                       |  |  |
| Name Details                     |  |                                 |               |                            |   |                    |                                       |  |  |
| <b>Title</b>                     |  | <b>First Name</b>               |               |                            | <b>Middle Name</b>                      |                    | <b>Sur Name</b>                       |  |  |
| SHRI                             |  | <b>KAKASAHEB</b>                |               |                            | <b>DEVRAO</b>                           |                    | <b>GAIKWAD</b>                        |  |  |
| CSL No./<br>SCSL No: (if known)  |  |                                 |               |                            |   |                    |                                       |  |  |
| Sex                              | <input checked="" type="checkbox"/> Male | <input type="checkbox"/> Female | Date Of Birth | 01/06/1972                 | Date of Retirement                      | <b>30.05.2032</b>  |                                       |  |  |
| Community                        | <b>SC</b>                                |                                 |               | Religion                   | <b>HINDU</b>                            |                    |                                       |  |  |
| Father's Name                    |  | <b>KAKASAHEB DEVRAO GAIKWAD</b> |               |                            |   |                    |                                       |  |  |
| Birth Details                    |  |                                 |               |                            |   |                    |                                       |  |  |
| Birth Place                      | <b>PUNE</b>                              |                                 |               | Birth State/UT             | <b>MAHARASTRA</b>                       | Nationality        | <b>INDIAN</b>                         |  |  |
| Birth District                   | <b>PUNE</b>                              |                                 |               | Mother Tongue              | <b>MARATHI</b>                          |                    |                                       |  |  |
| Domicile                         | <b>MAHARASHTRA</b>                       |                                 |               | Physically Handicap Status | --                                      |                    |                                       |  |  |
| Blood Group                      |  |                                 |               | Identification Marks       | <b>ROUND MARK ON RIGHT SIDE OF NECK</b> |                    |                                       |  |  |
| Marital Details                  |  |                                 |               |                            |   |                    |                                       |  |  |
| Marital Status                   | <b>MARRIED</b>                           |                                 |               | Spouse Name                | <b>JAYSHREE</b>                         |                    |                                       |  |  |
| Spouse Nationality               | <b>INDIAN</b>                            |                                 |               |                            |   |                    |                                       |  |  |
| Joining Details                  |  |                                 |               |                            |   |                    |                                       |  |  |
| Source of Recruitment            | <b>ON COMPASSION ATE GROUND</b>          |                                 |               | Joining Date               | <b>27.05.1993</b>                       | Retirement Details | <b>31.05.2032</b>                     |  |  |
| Departmental Examination Details |  |                                 |               |                            |   |                    |                                       |  |  |
|                                  | Level                                    |                                 |               | Year                       |   | Rank               |                                       |  |  |
| 1                                | NIL                                      |                                 |               | NIL                        |   | NIL                |                                       |  |  |
| 2                                | NIL                                      |                                 |               | NIL                        |   | NIL                |                                       |  |  |
| 3                                | NIL                                      |                                 |               | NIL                        |   | NIL                |                                       |  |  |

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 |      |
|--------------------|---|--|----------------------|------|
| NIL                | NIL                                     | NIL                                    | Since                | From |
| NIL                | NIL                                     | NIL                                    | NIL                  | NIL  |

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 |
|---------|----------------|---------------|------------------------|--|------------------|
| NIL     | NIL            | NIL           | NIL                    | NIL  | NIL              |

Transfer/Posting Detail (if applicable)

|  |                             |                                    |                                  |                  |
|--|-----------------------------|------------------------------------|----------------------------------|------------------|
| Place  |                             | Period of posting                  |                                  |                  |
|  |                             | Since                              | From                             |                  |
| NIL  |                             | NIL                                | NIL                              |                  |
| Remarks (if any)   |                             |                                    |                                  |                  |
| Language known   |                             |                                    |                                  |                  |
|  |                             | <b>Read</b>                        | <b>Write</b>                     | <b>Speak</b>     |
| Indian Language Known  | <b>MARATHI</b>              | <b>YES</b>                         | <b>YES</b>                       | <b>YES</b>       |
| 2  | <b>HINDI</b>                | <b>YES</b>                         | <b>YES</b>                       | <b>YES</b>       |
| 3  | <b>ENGLISH</b>              | <b>YES</b>                         | <b>YES</b>                       | <b>YES</b>       |
|  |                             |                                    |                                  |                  |
| Foreign Languages 1  | NIL                         | NIL                                | NIL                              | NIL              |
| 2  | NIL                         | NIL                                | NIL                              | NIL              |
| 3  | NIL                         | NIL                                | NIL                              | NIL              |
| <b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b> |                             |                                    |                                  |                  |
| Qualification  |                             | Discipline                         |                                  | Specialization 1 |
| <b>BACHALAR OF ARTS</b>  |                             | <b>ARTS</b>                        |                                  | <b>ECONOMICS</b> |
| Year   | Division                    | CGPA                               | Specialization 2                 |                  |
| <b>1994</b>  | <b>1<sup>ST</sup> CLASS</b> |                                    | <b>ECONOMICS</b>                 |                  |
| Institution  | University                  | Place                              | Country                          |                  |
| <b>ABASAHEB GARWARE COLLEGE PUNE</b>   | <b>UNIVERSITY OF PUNE</b>   | <b>PUNE</b>                        | <b>INDIA</b>                     |                  |
| <b>Experience</b>  |                             |                                    |                                  |                  |
| Type of Posting  |                             | <b>GROUP `C', NON GAZETTED</b>     |                                  |                  |
| Designation  |                             | <b>MULTI TASKING STAFF</b>         |                                  |                  |
| Ministry   |                             | <b>MINISTRY OF WATER RESOURCES</b> |                                  |                  |
| Office   |                             | <b>CWPRS, PUNE</b>                 |                                  |                  |
| 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</i>             |                             |                                    |                                  |                  |
| <b>Training</b>  |                             |                                    |                                  |                  |
| Training Year  | Training Name               | Training Subject                   |                                  |                  |
| --   | --                          | --                                 |                                  |                  |
|  |                             | 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 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.             |                |  |