

| ER Sheet Data Entry Form | | | | | | |
|--|---|-----------------------------------|---|----------------------------|--------|--|
| Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE | | | | | | |
| Employee No. : | | | | | | |
| Service | CCS | Designation | MULTI TASKING STAFF | Sub Cadre | | |
| Joining Date : 23.06.2015 | | | | | | |
| Name Details | | | | | | |
| Title | First Name | Middle Name | Surname | | | |
| Shri | RUSHIKESH | JAYPRAKASH | HARIYAN | Initials | | |
| Identity Card No. : | | | | | | |
| Sex | Male | Date Of Birth | 24.09.1988 | Date of Retirement | | |
| Community | VAISHYAVANI | Religion | Hindu | | | |
| Father's Name | JAYPRAKASH BALKRISHNA HARIYAN | | | | | |
| Birth Details | | | | | | |
| Birth Place | MUMBAI | Birth State/ UT | MAHARASHTRA | Nationality | Indian | |
| Birth District | MUMBAI | Mother Tongue | MARATHI | | | |
| Domicile | MAHARASHTRA | Physically Handicap Status | Not Applicable | | | |
| Blood Group | O+ve | Identification Marks | MOLE ON THE NAILBED OF THE RIGHT FINGER | | | |
| Marital Details | | | | | | |
| Marital Status | UNMARRIED | Spouse Name | -- | | | |
| Spouse Nationality | -- | | | | | |
| Joining Details | | | | | | |
| Source of Recruitment | UPSC/CWPRS Staff Selection Commission | Joining Date | 23.06.2015 | Retirement Date | | |
| Departmental Examination Details (If applicable) : Not Applicable | | | | | | |
| Level | | | Year | Rank | | |
| 1 | -- | | -- | -- | | |
| 2 | | | | | | |
| 3 | | | | | | |

| | | | | |
|-------------------------|------------------|-------------|--------------|--------------|
| Remarks (if any) | | | | |
| Languages known | | | | |
| Indian Languages Known | Name of Language | Read | Write | Speak |
| 1 | English | √ | √ | √ |
| 2 | Marathi | √ | √ | √ |
| 3 | Hindi | √ | √ | √ |
| Foreign Languages Known | -- | -- | -- | -- |
| 1 | | | | |
| 2 | | | | |

Details of deputation (if applicable) : Not 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 (if applicable) : Not Applicable

| 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) : : Not Applicable

| Place | Period of posting | |
|-------|-------------------|------|
| | Since | From |
| -- | -- | -- |

| Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details) | | | | | |
|---|---------------------------------|----------------------------|----------------------------------|------------------------|----------------------|
| Qualification | | Discipline | | Specialization 1 | |
| 1) HSC 2) B. COM | | 1) COMMERCE 2) COMMERCE | | | |
| Year | Division | | CGPA/ % Marks | Specialization 2 | |
| 1) 2006 2) 2013 | 1) Ist Class 2) Passed Class | | 1) 60.17 % 2) 37.71 % | 1) - 2) - | |
| Institution | | University | | Place | Country |
| 1) S.N. COLLEGE 2) UNIVERSITY OF MUMBAI | | 1) MUMBAI 2) MUMBAI | | 1) MUMBAI 2) MUMBAI | 1) India 2) India |
| Experience | | | | | |
| Type of Posting | | | Level | | |
| Temporary | | | | | |
| Designation | | | Present Position | | |
| Multi Tasking Staff | | | Group `C` | | |
| Ministry | | | Department | | |
| Water Resources, River Development and Ganga Rejuvenation | | | | | |
| Office | | | Place | | |
| Central Water and Power Research Station | | | Khadakwasla, Pune - 411 024 | | |
| Experience Subject | | | Period of Posting | | |
| Major | | Minor | | From | To |
| | | | | 23.06.2015 | Till date |
| <i>Note:-Refer the Annexure to fill above Major, Minor Subjects and below given training subject (minimum 1 week & above)</i> | | | | | |
| Training : Nil | | | | | |
| 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 |
| Awards/Publications | | | | | |
| 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
Officer

Signature of

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