	ER Sheet Data Entry Form																
Name	e of	Orga	niz	ation	: CEN	ITRAL	_ W	ATE	R AN	D PO	WE	RRE	SEAR	CH S	STAT	ON	, PUNE
Empl	oye	e No.	: E	1180													
Serv	ice	CCS	5	Designation			Assistant Resear Officer				h Sub Cadre			Research		arch	
Joini	ng C	ate :	18	3 th Aug	ust 2	2000						ı					
Name	e De	tails															
Title	•	Fi	rst	Name		N	1ida	dle N	Name)	S	urNa	me				
Mr.	(0)	Subha	sh			Pand	Pandurang				Jagtap			Init		als	
Identity Card No.: 863/09																	
Sex	Mal	e / F e	ema	lle	Dat	te Of I	Birth	n [25.07.1967			Date of Retirer			ement 31.07.2027		
Comn	nuni	ty		Hindu	indu			Religion			1	Maratha				•	
Fathe	Father's Name Late Shri Pandurang Pundlik Jagtap																
Birth	Det	ails															
Birth Place			Bhopa	nopal B		Birth State/ Madh UT			1adhy	a Pradesh Na		Nationality		Ind	dian		
Birth District Bhopa			I	Mother T				ner To				arath	i				
Domicile Bhopal Physically Hand					Handi	icap	Stat	us N	lot A	pplica	ble						
Blood Group					AB +ve			Identification Marks			(S	A big mole in right arm-pit			_		
Marit																	
		Statu			rried	/ Unma	ed	Spouse Name					Sa	Sau. Shubha Jagtap			
		Natio		lity							Ir	ndian					
Joini																	
Source of Recruitment			nent	th Emp				ining Oate	_			Retirement Date			31.	07.2027	
Depai	Departmental Examination Details (If applicable) - Not Applicable																
L			Leve	Level				Year			Rank						
1																	
2																	
3	-				-												

Remarks (if any)				
Languages known				
	Name of Language	Read	Write	Speak
Indian Languages 1 Known	Marathi	Yes	Yes	Yes
2	Hindi	Yes	Yes	Yes
3	English	Yes	Yes	Yes
4				
5				
Foreign Languages Known 1	N.A.			
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

SI. 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				
Worked as Junior Engineer in Deptt. of Lighthouses & Lightships, Ghatkopar (E), Mumbai	01.09.1997	17.08.2000				

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)													
Qualification						Discipline					Specialization 1		
B.E.					Civil Engineering								
Year			Divi	sion		CG	PA/ % Ma	rks		Specia	alization 2		
	1990			First				64.24 %					
	Institutio	n		University				Place			Country		
College	of Engir	neering	,		Nagpu			Wardl	na,			India	
	gram, W							Maharas	shtra				
Experie	nce : Se			enc	losed								
	Type of	f Postin	ıg						Level				
	Desig	nation						Prese	nt Po	sitio	n		
	Min	istry						Dor	artm	ont			
	1*1111	isti y						Del	Jaitii	ient			
	Of	fice							Place	!			
	Experien	ce Sub	ject		Period of Posting								
	Majo	r			Minor F					Fron	rom To		
					 Major, Minor Subjects and below give								
	fer the An I m 1 wee			ove I	Major, i	Minor S	ubje	cts and bel	ow giv	∕en tı	raining s	subject	
	: Not ap												
Training	g Year		Trair	ning	g Name Tr					ainin	g Subje	ect	
Le	evel	Insti	tute Nai	ne,	Place	Field Visit Country		Field Visit Plac		sit Plac	e (within India)		
Sponsoring Authority P			P	erioc	of Tra	aining			ation	ition		Result	
· ·			Fr	om		То		(in W	(in Weeks			Qualified	
									Not Qualifie				
Awards	Awards/Publications : Not applicable												
Type of Activity:					Academic				Non Academic				
Activity Area					Activity Subject					Activity Title			
Day Month V-			 Year	Activity				Level					
Day Month				ı eai	Activity Description/Remarks							LEVEI	
NI I Z) Canaar		00 00:					*h			: : 		

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. e: Place:

Information checked and verified – by

Signature of Officer

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