

**ER Sheet Data Entry Form**

<b>Basic Data</b>									
Officer ID No. Details									
Service	CSS	Cadre	NON-MINISTRIAL		Sub Cadre	MTS		Id No.	1676/14
Select List Year (Allot Year)									
Name Details									
<b>Title</b>		<b>First Name</b>			<b>Middle Name</b>			<b>Sur Name</b>	
SHRI		KRISHNA			-----			Initials	KUMAR
CSL No./ SCSL No: (if known)									
Sex	Y	<b>Male</b>	N	Female	Date Of Birth	03-03-1989	Date of Retirement	31-03-2049	
	E		O						
	S								
Community		OBC			Religion		HINDU		
Father's Name			KANTI LAL						
Birth Details									
Birth Place		KANTI, MUZAFFARPUR		Birth State/UT		BIHAR		Nationality	INDIAN
Birth District		MUZAFFARPUR			Mother Tongue		HINDI		
Domicile		BIHAR			Physically Handicap Status		NO		
Blood Group		B+			Identification Marks		A CUT MARK BELOW THE LEFT EYE		
Marital Details									
Marital Status		UNMARRIED			Spouse Name		NIL		
Spouse Nationality		NIL							
Joining Details									
Source of Recruitment			STAFF SELECTIO -N COMMISS -ION		Joining Date	08-10-2014	Retirement Details	NIL	
Departmental Examination Details									
Level					Year			Rank	
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
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
---	---	---	---	---	---

Transfer/Posting Detail (if applicable)

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

Remarks (if any)				
Language known		<b>Read</b>	<b>Write</b>	<b>Speak</b>
Indian Languages Known	HINDI	YES	YES	YES
2	ENGLISH	YES	YES	YES
3		---	---	---
4	---	--	---	---
5	---	--	---	---
Foreign Languages	---	--	---	---
1				
2	---	--	---	---
3	---	--	---	---

**Qualification** (Use extra photocopy sheets for multi qualifications, experience, training, awards details)

Qualification B.A (Hons.)	Discipline ARTS	Specialization 1  ECONOMICS
Year 2011	Division FIRST	CGPA ---
		Specialization 2 ---
Institution L.S COLLEGE MUZAFFARPUR	University B.R.A.B.U MUZAFFARPUR	Place MUZAFFARPUR
		Country INDIA

<b>Experience</b>					
Type of Posting			Level		
----			----		
Designation			Present Position		
----			----		
Ministry			Department		
----			----		
Office			Place		
----			----		
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	
		From		( in Weeks)	
---		---		---	
				Result	
				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 :PUNE

Information checked and verified - by

Signature of Officer

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