

ER Sheet Data Entry Form						
<b>Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE</b>						
<b>Employee No. : E0873</b>						
<b>Service</b>	CCS	<b>Designation</b>	MTS	<b>Sub Cadre</b>	Group C	
<b>Joining Date : 07.09.1989</b>						
<b>Name Details</b>						
<b>Title</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Sur Name</b>	<b>Initials</b>	<b>VVL</b>	
Shri	Vithal	Vishwanath	Lambate			
<b>Identity Card No. : 1172/11</b>						
<b>Sex</b>	Male	<b>Date Of Birth</b>	01.01.1967	<b>Date of Retirement</b>	31.01.2027	
<b>Community</b>	Dhangar (NTC)		<b>Religion</b>	Hindu		
<b>Father's Name</b>	Vishwanath Vaku Lambate					
<b>Birth Details</b>						
<b>Birth Place</b>	Bori	<b>Birth State/ UT</b>	Maharashtra	<b>Nationality</b>	Indian	
<b>Birth District</b>	Pune	<b>Mother Tongue</b>	Marathi			
<b>Domicile</b>	Maharashtra	<b>Physically Handicap Status</b>	NA			
<b>Blood Group</b>	B+	<b>Identification Marks</b>	Black mole on upper side of left forehead			
<b>Marital Details</b>						
<b>Marital Status</b>	Married		<b>Spouse Name</b>	Mrs. Vaishali Vithal Lambate		
<b>Spouse Nationality</b>	Indian					
<b>Joining Details</b>						
<b>Source of Recruitment</b>	Employment Exchange	<b>Joining Date</b>	07.09.1989	<b>Retirement Date</b>	31.01.2027	
<b>Departmental Examination Details (If applicable)</b>						
	<b>Level</b>	<b>Year</b>	<b>Rank</b>			
1	NA					
2						
3						

Remarks (if any)	NA			
<b>Languages known</b>				
	Name of Language	<b>Read</b>	<b>Write</b>	<b>Speak</b>
Indian Languages Known	1 Marathi	Good	Good	Good
	2 Hindi	Good	Good	Good
	3			
	4			
	5			
<b>Foreign Languages Known</b>				
	1 English	Good	Good	-
	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
NA				

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
	NA				

Transfer/Posting Detail (if applicable)

Place	Period of posting	
	Since	From
NA		

<b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b>					
Qualification		Discipline		Specialization 1	
Non Matriculate				NA	
Year	Division	CGPA/ % Marks	Specialization 2		
1984	9 <sup>th</sup> Pass		NA		
Institution		University	Place	Country	
Nilkantheshwar Vidyalaya, Lasurne		Maharashtra State Board	Pune	India	
<b>Experience</b>					
Type of Posting			Level		
Employment Exchange			Group-D		
Designation			Present Position		
Helper -III			MTS		
Ministry			Department		
MOWR,RD,GR			CWPRS		
Office			Place		
CWPRS			Khadakwasla, Pune		
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 (minimum 1 week &amp; above)</i>					
<b>Training</b>					
Training Year	Training Name			Training Subject	
NA					
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
	NIL				

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 : 25.06.2015

Place : Khadakwasla

Information checked and verified – by

Signature of Officer

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