

ER Sheet Data Entry Form						
<b>Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE</b>						
<b>Employee No. : E1287</b>						
<b>Service</b>	CCS	<b>Designation</b>	Store keeper-II	<b>Sub Cadre</b>	Group 'C' Non-Gazeted	
<b>Joining Date : 07.03.2005</b>						
<b>Name Details</b>						
<b>Title</b>	<b>First Name</b>	<b>Middle Name</b>	<b>SurName</b>		<b>Initials</b>	
Mr	MANISH	KUMAR			M	KUMAR
<b>Identity Card No.</b> :1442/12 dt.13.07.2012						
<b>Sex</b>	Male	<b>Date Of Birth</b>	13-11-1973	<b>Date of Retirement</b>	31.11.2033 (Approx)	
<b>Community</b>	SC	<b>Religion</b>	HINDU			
<b>Father's Name</b>	SHRI HEM CHANDRA SONKAR					
<b>Birth Details</b>						
<b>Birth Place</b>	BHOPAL	<b>Birth State/ UT</b>	MP	<b>Nationality</b>	INDIAN	
<b>Birth District</b>	BHOPAL	<b>Mother Tongue</b>	HINDI			
<b>Domicile</b>	UP	<b>Physically Handicap Status</b>	NA			
<b>Blood Group</b>	O (+VE)		<b>Identification Marks</b>	BLACK MOLE ON RIGHT HAND INDEX FINGER		
<b>Marital Details</b>						
<b>Marital Status</b>	Married		<b>Spouse Name</b>	Mrs. SNEH LATA SONKAR		
<b>Spouse Nationality</b>	INDIAN					
<b>Joining Details</b>						
<b>Source of Recruitment</b>	SSC(WR)	<b>Joining Date</b>	07.03.2005	<b>Retirement Date</b>	31.11.2033	
<b>Departmental Examination Details (If applicable)</b>						
	<b>Level</b>		<b>Year</b>		<b>Rank</b>	
1	NA		NA		NA	
2						
3						

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

Transfer/Posting Detail (if applicable)

Place	Period of posting	
	Since	From
NIL	NIL	NIL

<b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b>					
Qualification		Discipline		Specialization 1	
(1)DIPLOMA (2)Graduation, <b>More Qualification as declared in Service book</b>		ELECTRICAL ENGINEERING BA		TRACTION	
Year	Division		CGPA/ % Marks		Specialization 2
1997	1 <sup>st</sup>		71.1 %		
2001	II		48%		
Institution		University		Place	Country
Govt.G B Pant Poly. Alamnagar,Lucknow Th,B S Degree,College Tundla-Firozabad(U P)		U P State Technical Board ,Lucknow Dr.B R Ambedkar Univercity,Agra		Lucknow Tundla	INDIA India
<b>Experience</b>					
Type of Posting			Level		
Head Quarter			Group -C,Non- Gazetted		
Designation			Present Position		
SK-II			SK-II		
Ministry			Department		
Water Resources, River Development & Ganga Rejuvenation			Subordinate office under MOWR, RD & GR AEE©/Instrumentation Divisioni		
Office			Place		
Central Water & Power Research Station			Khadakwasla RS, Pune-411024		
Experience Subject			Period of Posting		
Major		Minor		From	To
				07.03.2005	Till Date
<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	
1998		Apprentice(Diploma Trainee)			
Level	Institute Name, Place		Field Visit Country	Field Visit Place (within India)	
	U P S E B,LUCKNOW				
Sponsoring Authority		Period of Training		Duration	Result
		From	To	( in Weeks)	Qualified
		19.02.1998	18.02.1999	12 months	
<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 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 :Pune

Information checked and verified – by

Signature of Officer

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