

| ER Sheet Data Entry Form   |                     |                                   |                            |                           |                 |             |
|--|---------------------|-----------------------------------|----------------------------|---------------------------|-----------------|-------------|
| <b>Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE</b> |                     |                                   |                            |                           |                 |             |
| <b>Employee No. : E1040</b>  |                     |                                   |                            |                           |                 |             |
| <b>Service</b>   | CCS                 | <b>Designation</b>                | M.T.S                      | <b>Sub Cadre</b>          | Group-C         |             |
| <b>Joining Date : 27/05/1993</b>   |                     |                                   |                            |                           |                 |             |
| <b>Name Details</b>  |                     |                                   |                            |                           |                 |             |
| <b>Title</b>   | <b>First Name</b>   | <b>Middle Name</b>                | <b>SurName</b>             |                           | <b>Initials</b> | <b>M.V.</b> |
| Mr.  | MOHAN               | VASANT                            | MARNE                      |                           |                 | M.V.        |
| <b>Identity Card No. :</b> 1599/13   |                     |                                   |                            |                           |                 |             |
| <b>Sex</b>   | Male                | <b>Date Of Birth</b>              | 18/09/1971                 | <b>Date of Retirement</b> | 30/09/2031      |             |
| <b>Community</b>   | Maratha             | <b>Religion</b>                   | Hindu                      |                           |                 |             |
| <b>Father's Name</b>   | VASANT GANPAT MARNE |                                   |                            |                           |                 |             |
| <b>Birth Details</b>   |                     |                                   |                            |                           |                 |             |
| <b>Birth Place</b>   | Nanded Gaon         | <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> | NIL                        |                           |                 |             |
| <b>Blood Group</b>   | B+ Ve               | <b>Identification Marks</b>       | Mole on abdomen right side |                           |                 |             |
| <b>Marital Details</b>   |                     |                                   |                            |                           |                 |             |
| <b>Marital Status</b>  | Married             | <b>Spouse Name</b>                | Mrs.VAISHALI               |                           |                 |             |
| <b>Spouse Nationality</b>  | Indian              |                                   |                            |                           |                 |             |
| <b>Joining Details</b>   |                     |                                   |                            |                           |                 |             |
| <b>Source of Recruitment</b>   | CWPRS               | <b>Joining Date</b>               | 27/05/1993                 | <b>Retirement Date</b>    | 30/09/2031      |             |
| <b>Departmental Examination Details (If applicable)</b>                      |                     |                                   |                            |                           |                 |             |
|  | <b>Level</b>        | <b>Year</b>                       | <b>Rank</b>                |                           |                 |             |
| 1  | NIL                 | NIL                               | NIL                        |                           |                 |             |
| 2  |                     |                                   |                            |                           |                 |             |
| 3  |                     |                                   |                            |                           |                 |             |

|                         |                  |             |              |              |
|-------------------------|------------------|-------------|--------------|--------------|
| Remarks (if any)        |                  |             |              |              |
| <b>Languages known</b>  |                  |             |              |              |
|                         | Name of Language | <b>Read</b> | <b>Write</b> | <b>Speak</b> |
| Indian Languages Known  | 1 Marathi        | Yes         | Yes          | Yes          |
|                         | 2 Hindi          | Yes         | Yes          | Yes          |
|                         | 3 English        | Yes         | Yes          | No           |
|                         | 4                |             |              |              |
|                         | 5                |             |              |              |
| Foreign Languages Known |                  |             |              |              |
|                         | 1 NIL            |             |              |              |
|                         | 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                                     |  |                      |      |

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            |               |                        |  |                  |

Transfer/Posting Detail (if applicable)

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

| <b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b>                  |                       |                    |                              |                                  |                |
|---|-----------------------|--------------------|------------------------------|----------------------------------|----------------|
| Qualification   |                       | Discipline         |                              | Specialization 1                 |                |
| S.S.C. Fail   |                       |                    |                              |                                  |                |
| Year  | Division              |                    | CGPA/ % Marks                | Specialization 2                 |                |
| March 1991-92   | ,                     |                    |                              |                                  |                |
| Institution   |                       | University         | Place                        |                                  | Country        |
| Puna Night Highschool   |                       | S.S.C Board        | Pune                         |                                  | India          |
| <b>Experience</b>   |                       |                    |                              |                                  |                |
| Type of Posting   |                       |                    | Level                        |                                  |                |
| Helper  |                       |                    | Group- D                     |                                  |                |
| Designation   |                       |                    | Present Position             |                                  |                |
| M.T.S   |                       |                    | Group- C                     |                                  |                |
| Ministry  |                       |                    | Department                   |                                  |                |
| MOWR, RD & GR   |                       |                    | C.W & P.R.S                  |                                  |                |
| Office  |                       |                    | Place                        |                                  |                |
| Telephone Section   |                       |                    | PUNE                         |                                  |                |
| Experience Subject  |                       |                    | Period of Posting            |                                  |                |
| Major   |                       | Minor              |                              | From                             | To             |
| Dispatch Work, House Keeping Work.  |                       |                    |                              | 1993                             | 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             |                                  |                |
|   |                       |                    |                              |                                  |                |
| 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          |
|   |                       |                    |                              |                                  |                |

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

Signature of Officer

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