

**ER Sheet Data Entry Form**

**Basic Data**

Officer ID No. Details

Service	CSS	Cadre	Group 'B' (Non Gazetted)	Sub Cadre	Steno. Gr.I	Id No. <b>1765/15</b>	Will be allocated by CS Division, LNB
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Select List Year (Allot Year)

Name Details

<b>Title</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Sur Name</b>
SHRI	<b>ANANT</b>	<b>SANTU</b>	<b>PATIL</b>

CSL No./  
SCSL No: (if known)

Sex	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Date Of Birth	<b>20.07.1971</b>	Date of Retirement	<b>31.07.2031</b>
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Community	<b>MARATHA</b>	Religion	<b>HINDU</b>
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Father's Name **SANTU DHONDIBA PATIL**

Birth Details

Birth Place	<b>BELGAUM</b>	Birth State/UT	<b>KARNATAKA</b>	Nationality	<b>INDIAN</b>
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Birth District **BELGAUM** Mother Tongue **MARATHI**

Domicile **MAHARASHTRA** Physically Handicap Status **--**

Blood Group	<b>B+VE</b>	Identification Marks	<b>ROUND MARK ON LEFT LEG KNEE</b>
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Marital Details

Marital Status	<b>MARRIED</b>	Spouse Name	<b>SANGEETA</b>
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Spouse Nationality **INDIAN**

Joining Details

Source of Recruitment	<b>STAFF SELECTION COMMISSION</b>	Joining Date	<b>06.11. 1995</b>	Retirement Details	<b>31.07.2031</b>
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Departmental Examination Details

	Level	Year	Rank
1	NIL	NIL	NIL
2	NIL	NIL	NIL
3	NIL	NIL	NIL

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	
NIL	NIL	NIL	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	NIL

Transfer/Posting Detail (if applicable)

Place	Period of posting	
	Since	From
NIL	NIL	NIL

Remarks (if any)					
Language known					
		<b>Read</b>	<b>Write</b>	<b>Speak</b>	
Indian Language Known	1	<b>MARATHI</b>	<b>YES</b>	<b>YES</b>	<b>YES</b>
	2	<b>HINDI</b>	<b>YES</b>	<b>YES</b>	<b>YES</b>
	3	<b>ENGLISH</b>	<b>YES</b>	<b>YES</b>	<b>YES</b>
	4	<b>KANNADA</b>	<b>YES</b>	<b>YES</b>	<b>YES</b>
Foreign Languages					
1	NIL	NIL	NIL	NIL	NIL
2	NIL	NIL	NIL	NIL	NIL
3	NIL	NIL	NIL	NIL	NIL
<b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b>					
Qualification		Discipline		Specialization 1	
<b>DIPLOMA IN COMMERCIAL PRACTISE</b>		<b>SECRETARIL</b>		<b>STENOGRAPHY</b>	
Year	Division	CGPA	Specialization 2		
<b>1990</b>	<b>2<sup>ND</sup> CLASS</b>		<b>COMMERCIAL SUBJECTS</b>		
Institution	University	Place	Country		
<b>GOVT. POLYTECHNIC, BELGAUM</b>	<b>BOARD OF TECH. EDUCATION, KARNATAKA</b>	<b>BELGLAUM</b>	<b>INDIA</b>		

<b>Experience</b>				
Type of Posting		<b>GROUP `B', NON GAZETTED</b>		
Designation		<b>STENOGRAPHER GRADE-I</b>		
Ministry		<b>MINISTRY OF WATER RESOURCES</b>		
Office		<b>CWPRS, PUNE</b>		
Experience Subject		Period of Posting		
Major	Minor	From	To	
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<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
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		Field Visit Country	Field Visit Place (within India)	
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Sponsoring Authority	Period of Training		Duration	Result
	From	To	( in Weeks)	Qualified
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<b>Awards/Publications</b>				
Type of Activity:		Academic		Non Academic
Activity Area		Activity Subject		Activity Title
Day	Month	Year	Activity Description/Remarks	Level
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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 :

Information checked and verified – by

Signature of Officer

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