

ER Sheet Data Entry Form						
<b>Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE</b>						
<b>Employee No. : E-1212</b>						
<b>Service</b>	CCS	<b>Designation</b>	M.T.S.	<b>Sub Cadre</b>		
<b>Joining Date :</b>						
<b>Name Details</b>						
<b>Title</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Sur Name</b>			
MR.	SANTOSH	PARSHURAM	SHINDE	Initials	SPS	
<b>Identity Card No. 1323/11</b>						
<b>Sex</b>	MA LE	<b>Date Of Birth</b>	10/07/1977	<b>Date of Retirement</b>	31/07/20 37	
<b>Community</b>	THAKAR	<b>Religion</b>	HINDU			
<b>Father's Name</b>	MR.PARSHURAM SHIVRAM SHINDE					
<b>Birth Details</b>						
<b>Birth Place</b>	PUNE	<b>Birth State/ UT</b>	PUNE	<b>Nationality</b>	INDIAN	
	MAHARASHTRA					
<b>Birth District</b>	PUNE	<b>Mother Tongue</b>	MARATHI			
<b>Domicile</b>	MAHARASHTRA	<b>Physically Handicap Status</b>	NO.			
<b>Blood Group</b>	AB+ve	<b>Identification Marks</b>	BLACK MOLE ON RIGHT EYE			
<b>Marital Details</b>						
<b>Marital Status</b>	Married		<b>Spouse Name</b>	SARALA		
<b>Spouse Nationality</b>	Indian					
<b>Joining Details</b>						
<b>Source of Recruitment</b>	CWPRS	<b>Joining Date</b>		<b>Retirement Date</b>	31/07/2037	
EMPLOYMENT EXCHANGE						
<b>Departmental Examination Details (If applicable)</b>						
	<b>Level</b>	<b>Year</b>	<b>Rank</b>			
Remarks (if any)						
<b>Languages known</b>						
	<b>Name of Language</b>	<b>Read</b>	<b>Write</b>	<b>Speak</b>		
Indian Languages Known 1	MARATHI	√	√	√		
2	HINDI	√	√	√		
3						
Foreign Languages Known	English	√	√	√		
<b>Name of the Office</b>	<b>Post held at that time in parent office</b>	<b>Name of post selected for deputation</b>	<b>Period of deputation</b>			
Nil			Since	From		

**Details of Foreign Visit**

Sl. No.					
Transfer/Posting Detail (if applicable) <b>Nil</b>					
<b>Place</b>		<b>Period of posting</b>			
		Since	From		

<b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b>				
Qualification				Specialization 1
12 <sup>th</sup> pass				
Year	Division	CGPA/ % Marks	Specialization 2	
Institution	University	Place	Country	
		Pune	India	
			India	
<b>Experience</b>				
Type of Posting		Level		
Permanent		Group C Non Gazette		
Designation		Present Position		
		Group C NON Gazette		
Ministry		Department		
MOWR, RD & GR		Sub-Ordinate office of MOWR, RD & GR		
Office		Place		
CW&PRS		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	
Level	Institute Name, Place	Field Visit Country	Field Visit Place (within India)	
Sponsoring Authority	Period of Training		Duration	Result
	From	To	( in Weeks)	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 : 19.06.2015

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.	