

ER Sheet Data Entry Form						
Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE						
Employee No. : E0779						
Service	CCS	Designation	CRAFTSMAN - A	Sub Cadre	-	
Joining Date : 28-03-1988						
Name Details						
Title	First Name	Middle Name	SurName			
MR.	SIKANDAR	TALLU	SONAWANE			
Identity Card No. :		918 / 09				
Sex	Male	Date Of Birth	01.06.1961	Date of Retirement	31.05.2021	
Community	NAV - BUDDHA	Religion	HINDU			
Father's Name	TALLU TULSIRAM SONAWANE					
Birth Details						
Birth Place	KIRKATWADI	Birth State/ UT	MAHARASHTRA	Nationality	INDIAN	
Birth District	PUNE	Mother Tongue	MARATHI			
Domicile	MAHARASHTRA	Physically Handicap Status	-			
Blood Group	O (-) ve	Identification Marks	-			
Marital Details						
Marital Status	Married	Spouse Name	SUJATA			
Spouse Nationality	INDIAN					
Joining Details						
Source of Recruitment	CWPRS	Joining Date	28.03.1988	Retire-ment Date	31.05.2021	
Departmental Examination Details (If applicable)						
	Level	Year	Rank			
1	-	-	-			
2	-	-	-			
3	-	-	-			

Remarks (if any)				
Languages known				
	Name of Language	Read	Write	Speak
Indian Languages Known	1			✓
	2	HINDI	✓	✓
	3	MARATHI	✓	✓
	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
-	-	-		
-	-	-	-	-

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
	-	-	-	-	-

Transfer/Posting Detail (if applicable)

Place	Period of posting	
	Since	From
-	-	-

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)					
Qualification		Discipline		Specialization 1	
8 th Std. Passed		N.A.		N.A.	
Year	Division		CGPA/ % Marks	Specialization 2	
	N.A.		N.A.	N.A.	
Institution		University		Place	Country
MAHARASHTRA		-		KHADAKWASLA, PUNE	INDIA
Experience					
Type of Posting			Level		
PERMANENT			GROUP `C`		
Designation			Present Position		
MTS			MTS		
Ministry			Department		
WATER RESOURCES			MECHANICAL WORKSHOP		
Office			Place		
C.W.P.R.S.			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 & above)</i>					
Training					
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
Awards/Publications					
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 : 22-06.2015

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.		