

ER Sheet Data Entry Form						
Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE						
Employee No. :E1043						
Service	CCS	Designation	LDC	Sub Cadre		
Joining Date :31/05/1993						
Name Details						
Title	First Name	Middle Name	SurName	Initials		
	SUNANDA	ANIL	BORATE			
Identity Card No. :						
Sex	Female	Date Of Birth	11/12/1971	Date of Retirement	31/12/2031	
Community	MALI	Religion	HINDU			
Father's Name	RAIKAR RAMCHANDRA BABU					
Birth Details						
Birth Place	KHAKADWASLA	Birth State/ UT	MAHARASHTRA	Nationality	INDIAN	
Birth District	PUNE	Mother Tongue	MARATHI			
Domicile	PUNE	Physically Handicap Status				
Blood Group	B+		Identification Marks	A MOLE ON RIGHT SOLE		
Marital Details						
Marital Status	Married		Spouse Name	ANIL VASANT BORATE		
Spouse Nationality	INDIAN					
Joining Details						
Source of Recruitment	CWPRS	Joining Date	31/05/1993	Retirement Date	31/12/2031	
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 MARATHI	YES	YES	YES
	2 HINDI	YES	YES	YES
	3 ENGLISH	YES	YES	YES
	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	
H.S.C		ARTS			
Year	Division	CGPA/ % Marks	Specialization 2		
1989	SECOND	52			
Institution	University	Place	Country		
	PUNE BOARD	PUNE	INDIAN		
Experience					
Type of Posting			Level		
			CLASS -III		
Designation			Present Position		
LDC			LDC		
Ministry			Department		
CWC			CWPRS		
Office			Place		
CWPRS			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 :

Place :

Information checked and verified – by

Signature of Officer

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