ER Sheet Data Entry Form																
Name	e of	Orga	niz	zation	: CENT	RAL	WAT	ER .	AND P	OWE	R RES	EAR	CH	STAT	101	N, PUNE
Empl	oye	e No.	. : E	E0926												
Service CCS		Designation			MTS				Sub Cadre							
<b>Joining Date</b> : 27/06/1990									•			•				
Name	e D	etails														
Title	2	Fi	rst	Name	•	Mi	ddle	Naı	me	Su	rNam	е				
Mr.		PRAKA	٩SH	ł	9	SONA.	JI				WAG	βH		Initi	als	
Identity Card No. :1299/11																
Sex Male				Date Of Birth		;	10,	10/03/1969		Date of Retirer		tiren	nent	31,	/03/2029	
Community			Wanja	Wanjari				Religion	1	Hindu						
Father's Name			е	SONAJI												
Birth	De	tails														
Birth	Pla	ice	W	anjarumrad Birt			Birth State/ Maharas UT			ashtı	htra Natio			ality	Ind	dian
Birt	h D	istrict		Jalna				М	Mother Tongue			Ма	rath	i		
Do	mic	ile			- Physi			ical	cally Handicap Status			N/	4			
Bloo	d Gı	roup		O +ve			Id	Identification Marks			ВІ	Black Mole on the chest				
		Detail														
Ма	rita	l Statı	JS	Married					Spouse Name				Mrs. Ranjana			
		e Nati		lity						Ind	dian					
		Detai									1 _					
Source of Recruitr		ment CWPRS Joining Date							irem Date	, ,						
Depa	Departmental Examination Details (If applicable)															
				Level				Year				Rank				
1																
2																
3	l							1								

Remarks (if any)											
Languages known											
	Name of Language	Read	Write	Speak							
Indian Languages 1 Known	Hindi	Yes	Yes	Yes							
2	Marathi	Yes	Yes	Yes							
3											
4											
Foreign Languages Known 1	English	Yes	Yes	Yes							
2											

## 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		
			From	То	
-	=	-			

## Details of Foreign Visit

SI. No.	Place of Visit	Date of visit	Post held at that time	Whether it is a personal or official	Details of visit
				visit	
	-	-	-	-	-

## Transfer/Posting Detail (if applicable)

Place	Period of posting						
	From	То					
-	-	-					

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)												
Qualification				Discipline					Specialization 1			
	10 <sup>th</sup>					-						=
Year				Division			CGPA/ % Marks					
	1986-87			-			=					
	Institution		U	University			Place					
Mahai	rastra High S	School		-	-			Jalna				India
Expe	rience											
	Тур	e of Po	sting						L	evel		
										oup-		
	D	esignat	ion					Pr		t Pos	sition	
									1	MTS		
		Ministr	/							artme		
										<b>NPRS</b>	<u> </u>	
		Office					Place					
							Khadakwasla, Pune 411024					
	Expe	rience S	ubject				Period of Posting					
		Major					Minor Fron					То
		erience	Subject			Period of Posting						
	Major			1inor					То			
	Refer the Ann			e Maj	jor, Min	or Sub	jects	and below	give	n trai	ning	subject
	mum 1 week	& abou	<i>(</i> e)									
Traini			Tunin	ina N	lama		Training Subject					
IIdii	ning Year		Train	ing iv	vame				110	311111119	y Sui	oject
	Level	Incti	tute Nan	no D	Naco	Fiold	\/ici+	Country	Fiol	d Mic	i+ DI-	oco (within India)
	Level	11150	tute Man	iie, r	lace	rieiu	Field Visit Country		Field Visit Place (within India)			ice (within maia)
_												_
Spor	nsoring Auth	ority	Pe	eriod of Training		Durat		tion	ion		Result	
Sponsoring Additioney			Fror		1 114	To			/eeks)			Qualified
			-				( 111 VVEC			,5.13)		- -
Awar	ds/Publica	tions								I		
Type of Activity:						$\sqrt{}$	Academic			Non Academic		
					Activ	Activity Subject Activity Title						
Day				of Research Papers					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: 30/6/2015 Place: Pune 24

Information checked and verified – by

Signature of Officer

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