

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

| | | | | | | | |
|---------|-----|-------|----------------------------|-----------|-------|-------------------------|----------------------|
| Service | GSS | Cadre | Group-C Central Government | Sub Cadre | CSMRS | Id No. B130240006418 | Employee Code 407 |
|---------|-----|-------|----------------------------|-----------|-------|-------------------------|----------------------|

| | |
|-------------------------------|------|
| Select List Year (Allot Year) | 1993 |
|-------------------------------|------|

Name Details

| Title | First Name | Middle Name | Sur Name | Initials | |
|-------|------------|-------------|----------|----------|---|
| Mr. | Shivcharan | - | - | - | - |

| | | | | | | | | |
|-----|-------------------------------------|------|--------------------------|--------|---------------|------------|--------------------|------------|
| Sex | <input checked="" type="checkbox"/> | Male | <input type="checkbox"/> | Female | Date of Birth | 01.01.1966 | Date of Retirement | 31.12.2025 |
|-----|-------------------------------------|------|--------------------------|--------|---------------|------------|--------------------|------------|

| | | | |
|-----------|-----|----------|-------|
| Community | OBC | Religion | Hindu |
|-----------|-----|----------|-------|

| | |
|---------------|--------------------|
| Father's Name | Late. Shri Lokmani |
|---------------|--------------------|

Birth Details

| | | | | | |
|-------------|--------------|----------------|-------------|-------------|--------|
| Birth Place | Vill. Dhonri | Birth State/UT | Uttarakhand | Nationality | Indian |
|-------------|--------------|----------------|-------------|-------------|--------|

| | | | |
|----------------|---------------|---------------|-------|
| Birth District | Pouri Garhwal | Mother Tongue | Hindi |
|----------------|---------------|---------------|-------|

| | | | |
|----------|-------------|----------------------------|-------|
| Domicile | Uttarakhand | Physically Handicap Status | N. A. |
|----------|-------------|----------------------------|-------|

| | | | |
|-------------|---|----------------------|----------------------------|
| Blood Group | - | Identification Marks | Ascar mark below right eye |
|-------------|---|----------------------|----------------------------|

Marital Details

| | | | |
|----------------|---------|-------------|-------------|
| Marital Status | Married | Spouse Name | Ms. Sushila |
|----------------|---------|-------------|-------------|

| | |
|--------------------|--------|
| Spouse Nationality | Indian |
|--------------------|--------|

Joining Details

| | | | | | |
|-----------------------|---------------------|--------------|------------|--------------------|------------|
| Source of Recruitment | Employment exchange | Joining Date | 27.07.1993 | Retirement Details | 31.12.2005 |
|-----------------------|---------------------|--------------|------------|--------------------|------------|

Departmental Examination Details: N.A.

| | Level | Year | Rank |
|---|-------|------|------|
| 1 | | | |
| 2 | | | |
| 3 | | | |

| | |
|------------------|--|
| Remarks (if any) | |
|------------------|--|

| Language Known | | | | | |
|------------------------|---|-------|-------|-------|---|
| | | Read | Write | Speak | |
| Indian Languages Known | 1 | Hindi | √ | √ | √ |
| | 2 | | | | |
| | 3 | | | | |
| | 4 | | | | |
| | 5 | | | | |
| Foreign Lang. Known | 1 | | | | |
| | 2 | | | | |
| | 3 | | | | |

| Address Details | | | | |
|-------------------------|--|--|----------|---------------|
| Permanent Address | Vill. Dhonri, PO. Devikhet Petty Dabarlsuan Distt. Pouri Garhwal | | City | Pouri Garhwal |
| | State/UT | Uttarakhand | Pin Code | - |
| Present Contact Address | H.N. 321, Sector-2 R. K. Puram | | City | New Delhi |
| | State/UT | Delhi | Pin Code | 110022 |
| | Phone (Off) | 26563140-43 | Fax. | 011-26853108 |
| | Phone(Res) | 9868500208 | Mob No | 9868500208 |
| | E-Mail (Mandatory) | Shivcharan20113@gmail.com | | |

| Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details) | | | | |
|---|----------|------------|-------------|------------------|
| Qualification | | Discipline | | Specialization 1 |
| High School | | Science | | - |
| Year | Division | CGPA | | Specialization 2 |
| 1981 | Second | - | | - |
| Institution | | University | Place | Country |
| Govt. High School Chalusain | | - | Uttarakhand | India |

| Experience | |
|----------------------|---|
| Type of Posting | Level |
| Permanent | Group- C, GP-Rs.2000/- |
| Designation | Present Position |
| Laboratory Attendant | Laboratory Attendant |
| Ministry | Department |
| MOWR, RG &GR | CSMRS |
| Office | Place |
| CSMRS Building | Olof Palme Marge, Hauz Khas New Delhi-11006 |
| Experience Subject | Period of Posting |

| | | | |
|-------|-------|------|----|
| Major | Minor | From | To |
| - | - | - | - |

Note:-Refer the Annexure to fill above Major, Minor Subjects and below given training subject

Training: N.A.

| | | | |
|----------------------|-----------------------|---------------------|-------------------------------------|
| 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) | <input type="radio"/> Qualified |
| | | | <input type="radio"/> Not Qualified |

Awards/Publications: N.A.

| | | |
|--------------------|--------------------------------|------------------------------------|
| Type of Activity : | <input type="radio"/> Academic | <input type="radio"/> Non Academic |
| Activity Area | Activity Subject | Activity Title |
| | | |
| Day Month Year | Activity Description/Remarks | Level |
| | | |

Note: (i) Concerned officer is responsible for the correctness of information sent through ER Sheet proforma.

(ii) Subject to verification by the concerned administrative authorities.

Date: 24.06.2015

Place: New Delhi

Information checked and verified - by

Shivcharan
Laboratory Attendant

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