

ER Sheet Data Entry Form						
Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE						
Employee No. :E1741						
Service	-	Designation	M.T.S	Sub Cadre	---	
Joining Date :13/09/2021						
Name Details						
Title	First Name	Middle Name	Surname			
MR.	LAVKESH		SHARMA	Initials		
Identity Card No. :						
Sex	MALE	Date Of Birth (DD-MM-YYYY)	17/06/1993	Date of Retirement	30/06/2053	
Community	HINDU	Religion	HINDU			
Father's Name	MR. BIJENDRA SHARMA					
Birth Details						
Birth Place	HAPUR	Birth State/UT	UTTAR PRADESH	Nationality	INDIAN	
Birth District	HAPUR	Mother Tongue	HINDI			
Domicile	UTTAR PRADESH	Physically Handicap Status	NO			
Blood Group	A+	Identification Marks	A CUT MARK ON LEFT HAND INDEX FINGER			
Marital Details						
Marital Status	MARRIED	Spouse Name	GUNJAN SHARMA			
Spouse Nationality	INDIAN					
Joining Details						
Source of Recruitment	SSC	Joining Date	13/09/2021	Retirement Date	30/06/2053	
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	HINDI	YES	YES	YES		
2						
Foreign Languages Known	ENGLISH	YES	YES	YES		
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
B.TECH.		MECHANICAL ENGG		
Year	Division	CGPA/ % Marks	Specialization 2	
2013	1 ST	75.34%		
Institution	University	Place	Country	
SDCET	GBTU	GHAZIABAD	INDIA	
Experience				
Type of Posting		Level		
Temporary		1		
Designation		Present Position		
M.T.S				
Ministry		Department		
MOWR		CWPRS		
Office		Place		
CWPRS KHADAKWASALA PUNE		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
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 Performa.

(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.			