	ER Sheet Data Entry Form ame of Organization: CENTRAL WATER AND POWER RESEARCH STATION, PUNE															
Name	<u>e o</u>	f Orga	niz	<u>ation</u>	: CEN	NTRA	L WA	ATE	RANI	POWI	ER F	RESEA	RCH S	TATI	ON,	PUNE
Empl	oy	ee No.	:E1	L756												
Serv	ice	-		Desig	gnatio	on	n LDC				Sub Cadre					
Joini	Joining Date :14/3/2022															
	Name Details															
Title	•			Name	•		Midd	lle N	lame			ame				
MR.		PRAMO								K	JMA	R		Initials PK		PK
Iden	tity	Card	No.	. :		265	2									
Sex	M	ALE					f Birth 1-YYY		28/1	.0/1993		Date of Retiren		31/10/2053		
Comn	nur	ity		UR					Re	ligion			NDU			
		Name	е	RAJEN	NDER	KUM	AR .					•				
Birth																
Birth	ı Pla	ace	K	(ATHU	RA	В	irth S U		:/ H	ARYANA	١		Natio	nality	IN	DIAN
Birt	:h C	istrict		SONI	PAT			M	other	Tongue			HIND:	NDI		
Do	Domicile HARYANA Physically Handicap Status NO															
Blood	d G	roup					ı		Ident	ification	ı Ma	rks				
		Detail														
Marital Status UNMARR				IED	IED Spouse Name				me							
		e Natio		ity									•			
		Detail														
Sourc	ce c	of Recr	uitm	nent		SSC	SC Joining 14/03/20 Date 2			3/20	- 1	tireme Date	31/	10/	2053	
Depai	rtm	ental E	xan	ninati	on De	tails	(If ap	plica	able)							
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2																
3																
Ren	nar	ks (if														
		ges kn	ow	n												
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Indian Languages Known		HINDI				YE	S YES		YES							
		ENGL	NGLISH			YES YES		ES	YES		ES					
Foreig Know 1		_angua	iges													
			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

SI. 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				Discipline				Specialization 1		
BA				ART						
Year			Division		CG	PA/ % Mai	rks	Spec	cialization 2	
2013-2016						50				
Institutio	n		Univer	sity		Place	e		Country	
CRA COLLE	GE		MDI	U		ROHT	AK		INDIA	
Experience										
Туре	of Post	ing					Level			
Des	ignatio	n				Pres	sent Posit	ion		
M	inistry			Department						
N	10WR			CWPRS						
(Office			Place						
CWPRS KHAD	OAKWA	SALA PL	JNE	PUNE						
Experie	nce Su	bject				Perio	od of Pos	ting		
Majo	r			Minor			From		То	
=										
Note:-Refer the An (minimum 1 wee			ove Major,	, Minor S	ubje	cts and belo	ow given t	raining	g subject	
Training										
Training Year Training Nam				ne Training Subject						
Level Institute Name, Plac			ne, Place	e Field Visit Country Field Visit Place (within			ace (within India			
Sponsoring Auth	Pe	eriod of T	 raining		Dura	ition	Result			
· <u> </u>	•		om	To		(in W	/eeks)		Oualified	

Awards/Publications									
Type of Activity:				А	cademic		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 : 01/07/2022 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.	