

| ER Sheet Data Entry Form                                                     |                            |                                   |                        |                           |                 |  |
|------------------------------------------------------------------------------|----------------------------|-----------------------------------|------------------------|---------------------------|-----------------|--|
| <b>Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE</b> |                            |                                   |                        |                           |                 |  |
| <b>Employee No. : E1692</b>                                                  |                            |                                   |                        |                           |                 |  |
| <b>Service</b>                                                               | CSS                        | <b>Designation</b>                | M.T.S.                 | <b>Sub Cadre</b>          | ---             |  |
| <b>Joining Date : 07/09/2021</b>                                             |                            |                                   |                        |                           |                 |  |
| <b>Name Details</b>                                                          |                            |                                   |                        |                           |                 |  |
| <b>Title</b>                                                                 | <b>First Name</b>          | <b>Middle Name</b>                | <b>Surname</b>         |                           | <b>Initials</b> |  |
| MR.                                                                          | ROHIT                      |                                   | SINGH                  |                           |                 |  |
| <b>Identity Card No. :</b>                                                   |                            |                                   |                        |                           |                 |  |
| <b>Sex</b>                                                                   | Male                       | <b>Date Of Birth (DD-MM-YYYY)</b> | 24/02/1994             | <b>Date of Retirement</b> | 28/02/2054      |  |
| <b>Community</b>                                                             | HINDUISM                   |                                   | <b>Religion</b>        | HINDU                     |                 |  |
| <b>Father's Name</b>                                                         | Lt. Rambilash Singh        |                                   |                        |                           |                 |  |
| <b>Birth Details</b>                                                         |                            |                                   |                        |                           |                 |  |
| <b>Birth Place</b>                                                           | PATNA                      | <b>Birth State/UT</b>             | BIHAR                  | <b>Nationality</b>        | INDIAN          |  |
| <b>Birth District</b>                                                        | PATNA                      | <b>Mother Tongue</b>              | HINDI                  |                           |                 |  |
| <b>Domicile</b>                                                              |                            | <b>Physically Handicap Status</b> | NO                     |                           |                 |  |
| <b>Blood Group</b>                                                           | O-ve                       | <b>Identification Marks</b>       | A mole on left eyebrow |                           |                 |  |
| <b>Marital Details</b>                                                       |                            |                                   |                        |                           |                 |  |
| <b>Marital Status</b>                                                        | Unmarried                  |                                   | <b>Spouse Name</b>     | NA                        |                 |  |
| <b>Spouse Nationality</b>                                                    | NA                         |                                   |                        |                           |                 |  |
| <b>Joining Details</b>                                                       |                            |                                   |                        |                           |                 |  |
| <b>Source of Recruitment</b>                                                 | STAFF SELECTION COMMISSION | <b>Joining Date</b>               | 7/9/2021               | <b>Retirement Date</b>    | 28/02/2054      |  |
| <b>Departmental Examination Details (If applicable)</b>                      |                            |                                   |                        |                           |                 |  |
|                                                                              | <b>Level</b>               | <b>Year</b>                       | <b>Rank</b>            |                           |                 |  |
| 1                                                                            |                            |                                   |                        |                           |                 |  |
| 2                                                                            |                            |                                   |                        |                           |                 |  |
| 3                                                                            |                            |                                   |                        |                           |                 |  |
| <b>Remarks (if any)</b>                                                      |                            |                                   |                        |                           |                 |  |
| <b>Languages known</b>                                                       |                            |                                   |                        |                           |                 |  |
|                                                                              | <b>Name of Language</b>    | <b>Read</b>                       | <b>Write</b>           | <b>Speak</b>              |                 |  |
| <b>Indian Languages Known</b>                                                | HINDI                      | YES                               | YES                    | YES                       |                 |  |
| 2                                                                            | ENGLISH                    | YES                               | YES                    | YES                       |                 |  |
| <b>Foreign Language Known</b>                                                | NA                         | NA                                | NA                     | NA                        |                 |  |
| 1                                                                            |                            |                                   |                        |                           |                 |  |
| 2                                                                            | NA                         | NA                                | NA                     | NA                        |                 |  |
| 3                                                                            | NA                         | NA                                | NA                     | NA                        |                 |  |

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 |
|---------|----------------|---------------|------------------------|--------------------------------------------|------------------|
|         | NIL            | NIL           | NIL                    | NIL                                        | NIL              |

Transfer/Posting Detail (if applicable)

| Place | Period of posting |      |
|-------|-------------------|------|
|       | Since             | From |
|       |                   |      |

| <b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b>                 |               |                  |                   |                  |  |
|----------------------------------------------------------------------------------------------------------------------------------|---------------|------------------|-------------------|------------------|--|
| Qualification                                                                                                                    |               | Discipline       |                   | Specialization 1 |  |
| B.com                                                                                                                            |               | Accounts (Hons.) |                   |                  |  |
| Year                                                                                                                             | Division      | CGPA/ % Marks    | Specialization 2  |                  |  |
| 2016                                                                                                                             | 2nd           | 56.5             |                   |                  |  |
| Institution                                                                                                                      |               | University       | Place             | Country          |  |
|                                                                                                                                  |               | Bhimrao Ambedkar | Bihar             | India            |  |
| <b>Experience</b>                                                                                                                |               |                  |                   |                  |  |
| Type of Posting                                                                                                                  |               |                  | Level             |                  |  |
| SSC                                                                                                                              |               |                  | 1                 |                  |  |
| Designation                                                                                                                      |               |                  | Present Position  |                  |  |
| MTS                                                                                                                              |               |                  |                   |                  |  |
| 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 &amp; above)</i> |               |                  |                   |                  |  |
| <b>Training</b>                                                                                                                  |               |                  |                   |                  |  |
| 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    |
| <b>Awards/Publications</b> |                       |                     |                                  |                |              |
| 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/<br>Department |  |                |  |
| E-mail id       |  | Room NO.                |  | Building Name: |  |
| Phone NO.       |  | Wing No.                |  |                |  |