ER Sheet Data Entry Form														
Name of	Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE													
Employe	e No.	:												
Service	CCS	5 D	Designation			CRAFTSMAN 'C					Sub		Group-C	
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		3			IGLISH				Yes			Yes		
Foreign Languages Known 1								N	lot app	olical				

Details of deputation (if applicable) not 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 not applicable

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) not applicable

Place	Period of posting					
	Since	From				

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Qualification			Discipline				Specialization 1			
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Year			Division CC			rks	Specialization 2			
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	U	niversit	.y		Place	e		Country		
ial		PUNE			JUNN	AR		India		
extra pho	tocopy	sheets fo	or multi	qualif	ications, ex	perience, t	raining,	awards details)		
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Establishment ATI SION MUMBAI			New Delhi			MANIK DHO JUNNAR		INDIA		
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Experience Type of Posting				Level						
Temporary			Group- 'C' (Non-Gazetted)							
Designation					Craft	sman "C	2″	•		
		MOWR, RD & GR								
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Awards/Publications								
Type of Activity:					Academic		Non Academic	
Activity Area					Activity Subject		Activity Title	
Day	Day Month Year					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 : 11.09.2017

Place : PUNE

Information checked and verified – by

Signature of Officer

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