

**ER Sheet Data Entry Form**

**Basic Data**

Officer ID No. Details

Service	CSS	Cadre	Minister	Sub Cadre	NA	Id No.	
Select List Year (Allot Year)							

Name Details

<b>Title</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Surname</b>				
Ms.	PRAVIN	MANSARAM	MEHATAR	Initials	PM		
CSL No./ SCSL No: (if known)							
Sex	<input checked="" type="checkbox"/> Male	Date Of Birth	19.08.1990	Date of Retirement	31.08.2050		
Community	OBC	Religion	HINDU				
Father's Name		MANSARAM KADUBA MEHATAR					

Birth Details

Birth Place	BORI	Birth State/UT	MAHARASHTRA	Nationality	INDIAN		
Birth District	LATUR	Mother Tongue	MARATHI				
Domicile	MAHARASHTRA	Physically Handicap Status	No				
Blood Group	O+	Identification Marks	MOLE ON LEFT HAND				

Marital Details

Marital Status	UNMARRIED	Spouse Name					
Spouse Nationality							

Joining Details

Source of Recruitment	SSC	Joining Date	24.08.2018	Retirement Details	31.08.2050		
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Departmental Examination Details

	Level	Year	Rank
1	NIL	NIL	NIL
2	NIL	NIL	NIL
3	NIL	NIL	NIL

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
NIL	NIL	NIL	NIL	NIL
NIL	NIL	NIL	NIL	NIL

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	NIL

Transfer/Posting Detail (if applicable)

Place	Period of posting

		Since		From	
	NIL		NIL		NIL
Remarks (if any)					
Language known					
		<b>Read</b>	<b>Write</b>	<b>Speak</b>	
Indian Language Known	1	MARATHI	YES	YES	YES
	2	HINDI	YES	YES	YES
	3	ENGLISH			
Foreign Languages					
	1	NIL	NIL	NIL	NIL
	2	NIL	NIL	NIL	NIL
	3	NIL	NIL	NIL	NIL
<b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b>					
Qualification		Discipline		Specialization 1	
M.Sc		SCIENCE		MATH	
Year		Division		CGPA	
2016		SECOND DIVISION		48	
Specialization 2					
Institution		University		Place	
S.D.COLLEGE OF COMPUTER AND MANAGEMENT		B.A.M.U.AURANGABAD		BHOKARDAN, DIST.-JALNA	
Country		INDIA			
<b>Experience</b>					
Type of Posting		TEMPORARY			
Designation		LA GR-II			
Ministry		MOWR,RD&GR			
Office		CWPRS			
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</i>					
<b>Training</b>					
Training Year		Training Name		Training Subject	
		Field Visit Country		Field Visit Place (within India)	
Sponsoring Authority		Period of Training		Duration	
		From To		( in Weeks)	
				Qualified	
				Not Qualified	
<b>Awards/Publications</b>					
Type of Activity:		Academic		Non Academic	
Activity Area		Activity Subject		Activity Title	
Day	Month	Year	Activity		Level

			Description/Remarks	

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

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

Date : 27.08.2018

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.		