

**ER Sheet Data Entry Form****Basic Data**

## Officer ID No. Details

Service Central Govt.	CSS	Cadre Group -I		Sub Cadre		Id No. 132 8/11	Will be allocated by CS Division, LNB
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Select List Year (Allot Year)

## Name Details

<b>Title</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Sur Name</b>
VENKATA RAMANA	MURTHY	Initials	GUMMA

CSL No./  
SCSL No: (if known)

Sex	Male	Female	Date Of Birth	05.06.1971	Date of Retirement	31/06/2031
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Community	HINDU	Religion	HINDU
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Father's Name GUMMA SURYA NARAYANA

## Birth Details

Birth Place	VISHAKAPATNAM	Birth State/UT	ANDHRAPRADESH	Nationality	INDIAN
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Birth District VISHAKAPATNAM Mother Tongue TELUGU

Domicile VISHAKAPATNAM,  
A.P. Physically Handicap Status -----

Blood Group	RH +VE	Identification Marks	
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## Marital Details

Marital Status		Spouse Name	
Spouse Nationality			

## Joining Details

Source of Recruitment		Joining Date		Retirement Details	
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## Departmental Examination Details

	Level	Year	Rank
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	
Remarks (if any)				
Language known				
		<b>Read</b>	<b>Write</b>	<b>Speak</b>
Indian Languages Known	1			
	2			
	3			
	4			
	5			
Foreign Languages				
	1			
	2			
	3			

<b>Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)</b>				
Qualification		Discipline		Specialization 1
Year	Division		CGPA	Specialization 2
Institution		University	Place	Country
<b>Experience</b>				
Type of Posting		Level		
Designation		Present Position		
Ministry		Department		
Office		Place		
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	Result
	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 Description/Remarks		Level

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 :

Place :

Information checked and verified – by

Signature of Officer

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