

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

| | | | | | | | |
|---------|-----|-------|-------------|-----------|----|--------|---------------------------------------|
| Service | CSS | Cadre | ministerial | Sub Cadre | NA | Id No. | Will be allocated by CS Division, LNB |
|---------|-----|-------|-------------|-----------|----|--------|---------------------------------------|

Select List Year (Allot Year)

Name Details

| | | | | | | | |
|--------------|-------------------|--------------------|-----------------|----------|-------|--|--|
| Title | First Name | Middle Name | Sur Name | | | | |
| MR | SHAILESH | PRABHAKAR | THONTE | Initials | S P T | | |

CSL No./
SCSL No: (if known)

| | | | | | | |
|-----|--|---------------------------------|---------------|------------|--------------------|------------|
| Sex | <input checked="" type="checkbox"/> Male | <input type="checkbox"/> Female | Date Of Birth | 11-06-1985 | Date of Retirement | 31-06-2045 |
|-----|--|---------------------------------|---------------|------------|--------------------|------------|

| | | | |
|-----------|---------|----------|-------|
| Community | GENERAL | Religion | HINDU |
|-----------|---------|----------|-------|

Father's Name PRABHAKAR

Birth Details

| | | | | | |
|-------------|--------|----------------|-------------|-------------|--------|
| Birth Place | NANDED | Birth State/UT | MAHARASHTRA | Nationality | INDIAN |
|-------------|--------|----------------|-------------|-------------|--------|

| | | | |
|----------------|--------|---------------|---------|
| Birth District | NANDED | Mother Tongue | MARATHI |
|----------------|--------|---------------|---------|

| | | | |
|----------|-------------|----------------------------|------|
| Domicile | MAHARASHTRA | Physically Handicap Status | N.A. |
|----------|-------------|----------------------------|------|

| | | | |
|-------------|-------|----------------------|-------------------|
| Blood Group | A+ ve | Identification Marks | MOLE ON RIGHT LEG |
|-------------|-------|----------------------|-------------------|

Marital Details

| | | | |
|----------------|-----------|-------------|------|
| Marital Status | UNMARRIED | Spouse Name | N.A. |
|----------------|-----------|-------------|------|

Spouse Nationality N.A.

Joining Details

| | | | | | |
|-----------------------|-------------------------------|--------------|------------|--------------------|------------|
| Source of Recruitment | DIRECT RECRUITMENT from SWPRS | Joining Date | 14-12-2015 | Retirement Details | 31-06-2045 |
|-----------------------|-------------------------------|--------------|------------|--------------------|------------|

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 | UAE | 2-11-2013 | IT ADMINISTRATOR | PERSONAL | PERSONAL VISIT |

Transfer/Posting Detail (if applicable)

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

| | | | | |
|--|--------------------------|---|----------------------------------|----------------------|
| Remarks (if any) | | | | |
| Language known | | | | |
| | | Read | Write | Speak |
| Indian Language Known | 1 | ENGLISH | YES | YES |
| | 2 | HINDI | YES | YES |
| | 3 | MARATHI | YES | YES |
| Foreign Languages | | | | |
| | 1 | NIL | NIL | NIL |
| | 2 | NIL | NIL | NIL |
| | 3 | NIL | NIL | NIL |
| Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details) | | | | |
| Qualification | | Discipline | | Specialization 1 |
| M.SC | | SCIENCE | | COMPUTER APPLICATION |
| Year | Division | percentage | Specialization 2 | |
| 2008 | FIRST CLASS with Honours | 78% | NIL | |
| Institution | | University | Place | Country |
| SWAMI RAMANAND TEERTH MARATHWADA UNIVERSITY | | SWAMI RAMANAND TEERTH MARATHWADA UNIVERSITY | NANDED | INDIA |
| Experience | | | | |
| Type of Posting | | GROUP `B` | | |
| Designation | | RESEARCH ASSISTANT (ENGINEERING) | | |
| Ministry | | MINISTRY OF WATER RESOURCES | | |
| Office | | CWPRS, 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</i> | | | | |
| Training | | | | |
| Training Year | Training Name | | Training Subject | |
| | | Field Visit Country | Field Visit Place (within India) | |
| Sponsoring Authority | | Period of Training | | Result |
| | | From | To | (in Weeks) |
| | | | | Qualified |
| | | | | Not Qualified |
| Awards/Publications | | | | |
| 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 : 15-01 -2016

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. | | | |