

ER Sheet Data Entry Form						
Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE						
Employee No. : E1753						
Service	-	Designation	LDC	Sub Cadre	---	
Joining Date : 14/03/2022						
Name Details						
Title	First Name	Middle Name	Surname			
MR.	RISHAV		AGARWAL	Initials	RA	
Identity Card No. : 2650						
Sex	MALE	Date Of Birth (DD-MM-YYYY)	11/06/1995	Date of Retirement	31/06/2055	
Community	UR	Religion	HINDU			
Father's Name	MOHAN LAL AGARWAL					
Birth Details						
Birth Place	JHANSI	Birth State/ UT	UTTAR PRADESH	Nationality	INDIAN	
Birth District	JHANSI	Mother Tongue	HINDI			
Domicile	UTTAR PRADESH	Physically Handicap Status	NO			
Blood Group	O+	Identification Marks	A CUT MARK ON FINGER			
Marital Details						
Marital Status	UNMARRIED	Spouse Name	-			
Spouse Nationality	-					
Joining Details						
Source of Recruitment	SSC	Joining Date	14/03/2022	Retirement Date	31/06/2055	
Departmental Examination Details (If applicable)						
	Level	Year	Rank			
1						
2						
3						
Remarks (if any)						
Languages known						
	Name of Language	Read	Write	Speak		
Indian Languages Known	HINDI	YES	YES	YES		
1						
2	ENGLISH	YES	YES	YES		
Foreign Languages Known						
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

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)			
Qualification	Discipline		Specialization 1
B.TECH	ECE		
Year	Division	CGPA/ % Marks	Specialization 2
2018	1 ST	68	
Institution	University	Place	Country
AKGEC	AKTU	JHANSI	INDIA
Experience			
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 (minimum 1 week & above)</i>			
Training			
Training Year	Training Name		Training Subject
Level	Institute Name, Place	Field Visit Country	Field Visit Place (within India)
Sponsoring Authority	Period of Training		Duration
	From	To	(in Weeks)
			Result
			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 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/ Department		
E-mail id		Room NO.	Building Name:	
Phone NO.		Wing No.		