

ER Sheet Data Entry Form						
Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE						
Employee No. :						
Service	CCS	Designation	LAB. ASSTT.GR.-II	Sub Cadre		
Joining Date : 21 DECEMBER 2018						
Name Details						
Title	First Name	Middle Name	SurName			
MR.	RASHMITA	VINAYAK	BAPARDEKAR	Initials		
Identity Card NO.:						
Sex	FEMALE	Date Of Birth	27.09.1995	Date of Retirement	30.09.2055	
Community	MARATHA	Religion	HINDU			
Father's Name	VINAYAK LAXMAN BAPARDEKAR					
Birth Details						
Birth Place	MUMBAI	Birth State/UT	Maharashtra	Nationality	Indian	
Birth District	MUMBAI SUB-URBAN	Mother Tongue	Marathi			
Domicile	Maharashtra	Physically Handicap Status	Nil			
Blood Group	A+VE	Identification Marks	MOLE ON LEFT HAND			
Marital Details						
Marital Status	Unmarried	Spouse Name	N.A.			
Spouse Nationality	N.A.					
Joining Details						
Source of Recruitment	CWPRS	Joining Date	21.12.2018	Retirement Date	30.09.2055	
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	1 Marathi	Yes	Yes	Yes		
	2 Hindi	Yes	Yes	Yes		
	3 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.Sc.	Science	Computer Science	
Year	Division	CGPA / % Marks	Specialization 2
2016	II	53.66%	-
Institution	University	Place	Country
D.G. RUPAREL COLLEGE	MUMBAI UNIVERSITY	MUMBAI	India

Experience

Type of Posting	TEMPORARY
Designation	LABORATORY ASSISTANT – GR. II
Ministry	MOWR RD & GR
Office	CWPRS

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		Result	
		From	To	(in Weeks)			
Awards/Publications: nil							
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 proforma.

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

Date : 26.12.2018

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.			