

| ER Sheet Data Entry Form | | | | | |
|--|-------------------------|-----------------------------------|--------------------------------|---------------------------|-----------|
| Name of Organization : CENTRAL WATER AND POWER RESEARCH STATION, PUNE | | | | | |
| Employee No. : | | | | | |
| Service | - | Designation | JUNIOR ENGINEER | Sub Cadre | --- |
| Joining Date :28/01/2019 | | | | | |
| Name Details | | | | | |
| Title | First Name | Middle Name | Surname | Initials | SK |
| MR. | SHANU | | KHANZADA | | SK |
| Identity Card No. : 508939928154 | | | | | |
| Sex | Male | Date Of Birth | 10/10/1993 | Date of Retirement | |
| Community | UR | Religion | MUSLIM | | |
| Father's Name | ASHFAQ AHMED KHANZADA | | | | |
| Birth Details | | | | | |
| Birth Place | VEIR | Birth State/ UT | RAJASTHAN | Nationality | INDIAN |
| Birth District | BHARATPUR | Mother Tongue | HINDI | | |
| Domicile | KERELA | Physically Handicap Status | NO | | |
| Blood Group | O-ve | Identification Marks | SCAR ON RIGHT SIDE OF FOREHEAD | | |
| Marital Details | | | | | |
| Marital Status | UNMARRIED | Spouse Name | | | |
| Spouse Nationality | | | | | |
| Joining Details | | | | | |
| Source of Recruitment | SSC | Joining Date | 28/01/2019 | Retirement Date | |
| 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 | |
| | 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 | CIVIL ENGINEERING | | |
| Year | Division | CGPA/ % Marks | Specialization 2 |

| | | | | |
|---|--------------------------|-------------------------|----------------------------------|------------------|
| 2015 | 1 st DIVISION | | 81.56 | |
| Institution | | University | | Country |
| SRM NCR CAMPUS | | SRM UNIVERSITY | | INDIA |
| | | Place | | |
| | | MODINAGAR, GHAZIABAD | | |
| Experience | | | | |
| Type of Posting | | | Level | |
| | | | 4 | |
| Designation | | | Present Position | |
| JUNIOR ENGINEER | | | JUNIOR ENGINEER | |
| Ministry | | | Department | |
| MOWR | | | CWPRS | |
| Office | | | Place | |
| CWPRS KHADAKWASALA PUNE | | | PUNE | |
| Experience Subject | | | Period of Posting | |
| Major | | Minor | | 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. | |
|-----------|--|----------|--|