

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

Service	CSS	Cadre		Sub Cadre		Id No.	will be alerted by CS Division, LNB
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Select List Year (Allot Year)

Name Details

Title	First Name	Middle Name	Sur Name	Initials	
	ANAND		KISHORE		

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/>	Male	<input type="radio"/>	Female	Date of Birth	02.10.1964	Date of Retirement	31.10.2024
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Community	General	Religion	Hindu
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Father's Name	RAJENDRA PRASAD SINHA
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Birth Details

Birth Place	PATNA	Birth State/UT	Bihar	Nationality	INDIAN
Birth District	PATNA	Mother Tongue		HINDI	
Domicile			Physically Handicap Status		
Blood Group	O +ve	Identification Marks		Cut marks on both Eyebrow	

Marital Details

Marital Status	Married	Spouse Name	Dipu Sinha
Spouse Nationality	INDIAN		

Joining Details

Source of Recruitment	DR SO	Joining Date	27-06-1987	Retirement Details	
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Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

Remarks (if any)					
Language Known					
		Read		Write	Speak
Indian Languages Known	1	HINDI	Fluent	Fluent	Fluent
	2	ENGLISH	Fluent	Fluent	Fluent
	3				
	4				
	5				
Foreign Lang. Known	1				
	2				
	3				
Address Details					
Permanant Address		A-29, Vijay Nagar, Hanuman Nagar, Patna		City	PATNA
		State/UT	Bihar	Pin Code	800,026
Present Contact Address		A-29, Vijay Nagar, Hanuman Nagar, Patna		City	PATNA
		State/UT	Bihar	Pin Code	800,026
		Phone (Off)		Fax.	
		Phone(Res)		Mob No	7,654,587,434
		E-Mail (Mandatory)	akishore46@yahoo.co.in		

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)

Qualification		Discipline		Specialization 1	
GRADUATE		SCIENCE			
Year	Division	CGPA	Specialization 2		
1,984					
Institution		University		Place	Country
College of Commerce		Magadh University		PATNA	INDIA

Experience

Type of Posting		Level			
Designation		Present Position			
Ministry		Department			
Ministry of Water Resources, RD & GR		Ganga Flood Control Commission, Patna			
Office		Place			
Ganga Flood Control Commission, Patna		PATNA			
Experience Subject		Period of Posting			
Major		Minor		From	To

Note:-Refer the Annexure to fill above Major, Minor Subjects and below givan training subject

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)	<input type="radio"/>	Qualified
				<input type="radio"/>	Not Qualified

Awards/Publications

Type of Activity :			<input type="radio"/> Academic		<input type="radio"/> 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.	