

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

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

Name Details

Title	First Name	Middle Name	Sur Name	Initials
Mr.	MUKESH	KUMAR	SINHA	

CSL No./
SCSL No: (if known)

Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	02.01.1965	Date of Retirement	31.01.2025
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Community: General Religion: Hindu

Father's Name: SHRI AKSHAY KUMAR PRASAD

Birth Details

Birth Place	HAZARIBAGH	Birth State/UT	Jharkhand	Nationality	INDIAN
Birth District	HAZARIBAGH	Mother Tongue	HINDI		
Domicile	Jharkhand	Physically Handicap Status			
Blood Group	O +ve	Identification Marks	TIL MARK UNDER LEFT E'		

Marital Details

Marital Status	Married	Spouse Name	SMT RASHMI KUMARI
Spouse Nationality			

Joining Details

Source of Recruitment		Joining Date	02.07.1991	Retirement Details	31.01.2025
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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		C/O SHRI A.K. PRASAD, VISHNUPURI, GALI NO-2, AATA CHAKKI GALI, NEAR SHYV MANDIR, DISTT HAZARIBAGH		City	HAZARIBAGH
		State/UT	Jharkhand	Pin Code	825,301
Present Contact Address		H/O OF RAJNATH PRASAD, INFRONT OF P.K. IMAGING, MAZAR GALI, PATEL BATHI, SUEKUPURA, PATNA		City	PATNA
		State/UT	Bihar	Pin Code	800,014
		Phone (Off)	6,122,233,591	Fax.	6,122,217,294
		Phone(Res)		Mob No	9,835,405,154
		E-Mail (Mandatory)	mukesh_gfcc@yahoo.co.in		

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

Qualification		Discipline		Specialization 1	
B.A. (HONS)		ARTS		PSYCHOLOGY	
Year	Division	CGPA		Specialization 2	
1,987	1ST				
Institution		University		Place	Country
J.N.COLLEGE, DHURWA		RANCHI UNIVERSITY		RANCHI	INDIA

Experience

Type of Posting		Level			
		Steno Gd C			
Designation		Present Position			
PA		Regular			
Ministry		Department			
MINISTRY OF WATER RESOURCES		GANGA FLOOD CONTROL COMMISSION			
Office		Place			
GANGA FLOOD CONTROL COMMISSION		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		MINISTRY OF WATER RESOURCES			
E-mail Id	Room No.	Building Name :		SINCHAI BHAWAN		
Phone No.	2,217,294	Wing No.				