

प्रशा॰अनु॰रा॰ज॰स॰/Admn.Section, NIH हायरी नं॰/Diary No. 4.8.0

			E		t Data Er	try Fo	rm	-	_		
Basic Data			-								-
Officer ID No.	Details	116	5	-	-			-		-	
Service CSS	Cadre	GROUP'B'			Sub TECHNICAL Cadre				ld No.	will be alle Divisio	ned by CS n,LNR
Select List Year Year)	(Allot			900							
Name Details		-			-						
Title	First	Name	3.	Mid	dle Nam	е	Sur N	ame			
انتا	MOHAR	77				5	HPMI		Initials	5 6	oken
CSL No.	i i: (if know	n)									
Sex Male	OF	emale	Date of B	irth 20	-10-196	0	Date of Ret	rement	31-10	2020	)
Com	munity	(SC)J/	TAV		3	Religi	on	HINDU			
Father's	s Name	Late	- ITWAR	TLAL	-				-		
Birth Details				Constant of			16			1	
Birth Pla	ce Sum	ERA	Birti	n State/l	JT UTTA	R PRAT	ESH Na	ationality	INI	MAIC	
Birth District		ALI	ALIGARH		Mother '		er Tongue		Idnih		
Domicile	Domicile UTTAR P		PRADESH [		Physically Hand		andicap Status		NIL		20
Blood Gro	Blood Group		B <sup>+</sup>		Ident	ification	n Marks		ON NOSE		
Marital Details			2.1		***			LEKIGHT	HAND	SIDC	
Marital Status MA		MAR	MARRIED		Spouse Name			Smt PUSHPA DEVI			
Spouse Natio	onality	INE	MAI								
oining Details											-
Source of Recruitmen		MAR		Joining Date	20.03	1987	Retireme		0.202	10	
epartmental Ex	amination	Details	3					<del>-</del>	-		
		Level	7		-	Year	7		Rank	/	
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1979 +	1984	II DIVISION	N + I DIVISION	46.6%-	+ 86	46%				
Institution (			University	niversity			Place			
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Experience										
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	M	linistry				Depa	rtment			
	Moi				N	1. H. ROOK	KEE (H	-I DIVISION)		
		Office		L	17	PI	ace			
	N.1-1	H ROORKE	EE			ROOR	KEE			
		nce Subject				Period o	f Postin	9		
	Major			nor -		From	n	10		
ENREACHME	NT TECHI	BY TRITIUM	RADEN CONCENT	RATION IN L	VATER	20.03-19	87	CONTINUE		
			titute Name, Pla	Name, Place Field Visit Co			Field V	isit Place (within Inc		
Connection			Devied of The	ala a		D. C.	121			
Sponsoring	Authority		Period of Trai			Duration		Result		
		- 1	rom	То		( in Week	s)	O Qualified		
wards/Public	notions			_				O Not Qualified		
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Type of Activity : Activity Area			O Academic  Activity Subject			O Non Academic				
A	cuvity Ale			ACTIVITY SU	bject			Activity Title		
Day M	lonth	Year		Description	n/Ren	narks		Level		
ote: (i) Cond	erned CS	Year		by Description/Remarks Level or the correctness of information sent through ER						
	2015	Place : R		dministrat	tive au	thorities.	Signa	ture of Officer		
tion Officer	-	1	Ministry/D	epartmen	t 1	HIN				
all ld	Soadn	m@nih.er	Room No.		211	-	g Name	:		
ne No.	34990		Wing No.		7.11					

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Language Known		+ 10 ib				Title -			
		Read			Write	S	Speak		
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Foreign Lang. 1	ENGLISH		V [	T)					
Known 2			<u> </u>		I				
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Address Details						1			
Permanant Address	VILL-4RO SUM	Cit		ty	ALIGARH				
	State/UT	DESH E	Pi	n Code	202126				
Present Contact Address	H-NO - CG-3, 3 P.O. DHANDHE	TALVIHAR NI KI KHWAZAGIP	Y CI	ty .	ROORKEE				
	State/UT	UTTARAKHA	AND Pin		n Code	247667		_	
9.	Phone (Off)	Phone (Off)   01332-2			x			-	
	Phone(Res)	_			ob No	09837177667			
	E-Mail (Mandatory)	makasho	5@gmai	l.co	m		19		

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