

शा.अनु.रा.ज.स./Admn. Section, NIM

हायरी बं./Diary No. 525

दिनांक/Date. 26/06/15

## ER Sheet Data Entry Form

Basic Data									
Officer ID No. Details									
Service	CSS	Cadre	Technical		Sub Cadre	Group B		Id No.	will be allotted by CS Division, LNR
Select List Year (Allot Year)		1174							
Name Details									
Title	First Name		Middle Name		Sur Name			Initials	
	GURDEEP		SINGH		DUA				GS
CSL No./ SCSL No: (if known)									
Sex	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Date of Birth	23-09-1987		Date of Retirement	30-09-2022		
Community		Religion		SIKH					
Father's Name		Late Sh. Ajit Singh Dua							
Birth Details									
Birth Place	ROORKEE		Birth State/UT	Uttarakhand		Nationality	Indian		
Birth District	Haridwar		Mother Tongue		Hindi				
Domicile	Physically Handicap Status		NA						
Blood Group	O negative		Identification Marks		mole on right leg				
Marital Details									
Marital Status	Married		Spouse Name		Smt. Jogendra Kaur Dua				
Spouse Nationality	Indian								
Joining Details									
Source of Recruitment	Direct Recruitment		Joining Date	09-03-1987		Retirement Details	30-09-2022		
Departmental Examination Details									
	Level		Year		Rank				
1	/		/		/				
2	/		/		/				
3	/		/		/				

Qualification (Use extra photocopy sheets for mult qualification, experience, training, awards details)					
Qualification		Discipline		Specialization 1	
Inter (Science) I.T.I.		Science group + Electrical			
Year		Division		Specialization 2	
1979, 1980-84		I			
Institution		University		Place	
I.T.I. (Electrical)		I.T.I. Saharanpur		Saharanpur	
Experience					
Type of Posting			Level		
Technician-Gr-II <input checked="" type="checkbox"/>			Technician-Gr-I <input checked="" type="checkbox"/>		
Designation			Present Position		
H.O.W.R. <input checked="" type="checkbox"/>			N.I.H. Rookkee <input checked="" type="checkbox"/>		
Ministry			Department		
N.I.H. Rookkee			Rookkee		
Office			Place		
Electrical					
Experience Subject			Period of Posting		
Major		Minor		To	
Note:-Refer the Annexure to fill above Major, Minor Subjects and below given training subject					
Training					
Training Year		Training Name		Training Subject	
Level		Institute Name, Place		Field Visit Place (within India)	
<input checked="" type="checkbox"/>					
Sponsoring Authority		Period of Training		Duration	
		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: 19-6-15. Place: Rookkee  
Information checked and verified - by

Signature of Officer  
19-6-15.

Section Officer		Ministry/Department	NIH		
E-mail Id	soadmn@nih.ernet.in	Room No.	211	Building Name :	
Phone No.	249258	Wing No.			

Remarks (if any)					
Language Known					
		Read	Write	Speak	
Indian Languages Known	1	Hindi	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>
	2	English	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
	3	Punjabi	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>
	4		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
	5		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Foreign Lang. Known	1		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
	2		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
	3		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Address Details					
Permanant Address	H. No. 13, Mohalla Satti,	City	Roorkee		
	State/UT	Uttarakhand <input checked="" type="checkbox"/>	Pin Code	247667	
Present Contact Address	H. No. 13, Mohalla Satti,	City	Roorkee		
	State/UT	Uttarakhand <input checked="" type="checkbox"/>	Pin Code	247667	
	Phone (Off)	01332249271	Fax.		
	Phone(Res)	9837162036	Mob No		
	E-Mail (Mandatory)	gurdeep Singh dya 2014@gmail.com			