

## ER Sheet Data Entry Form

## Basic Data

Officer ID No. Details - I.D. Card No.: 1288

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
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IFTAKHAR

AHMAD

Initials

CSL No./ SCSL No: (if known)
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Sex	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	Date of Birth	05.1.1964	Date of Retirement	31.01.24
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Community

O.B.C

Religion

MUSLIM

Father's Name

ZAHOR AHMAD

## Birth Details

Birth Place	VILL:-LATER DEVA SHAIKH	Birth State/UT	UTTARAKHAND	Nationality	INDIAN
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Birth District	HARIWAR	Mother Tongue	HINDI
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Domicile	UTTARAKHAND	Physically Handicap Status
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Blood Group	O+	Identification Marks	MARK ON FOR HEAD
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## Marital Details

Marital Status	MARRIED	Spouse Name	RUBEENA PARVEEN
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Spouse Nationality	INDIAN
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## Joining Details

Source of Recruitment	DIRECT DRIVER	Joining Date	19.6.1989	Retirement Details	31.01.2024
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## Departmental Examination Details

Level	Year	Rank
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1

2

3

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

Qualification	Discipline		Specialization 1
9 Pass			
Year	Division	CGPA	Specialization 2
1973			
Institution	University	Place	Country
JABALPUR		ROORKEE	INDIA

**Experience**

Type of Posting	Level		
PERMANENT	GROUP. B		
Designation	Present Position		
DRIVER	DRIVER		
Ministry	Department		
M.O. W.R	N.I.H. ROORKEE		
Office	Place		
ROORKEE	ROORKEE		
Experience Subject	Period of Posting		
Major	Minor	From	To

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

**Training**

Training Year	Training Name	Training Subject	
2015	I.D.T.R	TWO DAYS L.M.V REFRESHER COURSE	
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 : 15.01.2016 Place : N.I.H. ROORKEE  
Information checked and verified - by

*[Signature]*  
Signature of Officer

Section Officer	<i>[Signature]</i>	Ministry/Department	
E-mail Id	so.adms@nih.cerindia	Room No.	211
Phone No.	249258	Building Name :	Admin Block
		Wing No.	

marks (if any)					
Language Known					
		Read	Write	Speak	
Indian Languages Known	1	HINDI	✓	✓	✓
	2	ENGLISH	✓	✓	✓
	3				
	4				
	5				
Foreign Lang. Known	1				
	2				
	3				
Address Details					
Permanant Address	VILL: LATHER DEVA SHAIK		City	UTTARAKHAND	
	P.O:- 10 UBAL PUR		Dist: HARIDWAR		
	State/UT	UTTARAKHAND	Pin Code	247668	
Present Contact Address			City		
	State/UT	UTTARAKHAND	Pin Code	247667	
	Phone (Off)	01332-249301	Fax.		
	Phone(Res)		Mob No	9758812491	
	E-Mail (Mandatory)	ahmedif67@gmail.com			