

हायरी नं./Diary No. 1367

दिनांक/Date. 2.6/06/15

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details		0296			
Service	CSS	Cadre	Sub Cadre	Id No.	will be altered by CG Division, LNR
Regular		Ministerial	Multi Tasking Staff	1296	
Select List Year (Allot Year)					

Name Details

Title	First Name	Middle Name	Sur Name	Initials
	Shri Ram	Purasad		
CSL No./ SCSL No. (if known)				
Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	Date of Retirement
			25.04.1964	30.04.2024
Community	OBC (Kumhar)	Religion	HINDU	
Father's Name	Shri, Surya Bali			

Birth Details

Birth Place	Madhopur	Birth State/UT	Bihar	Nationality	Indian
Birth District	Gopal Ganj	Mother Tongue	Hindi		
Domicile	Uttarakhand	Physically Handicap Status	Nil		
Blood Group	B+ive	Identification Marks	Death case		

Marital Details

Marital Status	Married	Spouse Name	Girija Devi
Spouse Nationality	Indian		

Joining Details

Source of Recruitment	Open Recruitment	Joining Date	24.01.1990	Retirement Details	Date of Retirement
					30.04.2024

Departmental Examination Details

Level	Year	Rank
1		
2		
3		

N.A.

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

Qualification		Discipline		Specialization 1	
8 th Passed.		Gen. Subject.		—	
Year	Division	CGPA		Specialization 2	
1977	Passed.	—		—	
Institution		University		Place	Country
Kamalakant Kansara, Highschool.		—		Kamalakant Kansara,	India
Experience					
Type of Posting			Level		
Designation			Present Position		
Ministry			Department		
Office			Place		
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	
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	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.
Phone No.	Wing No.
Squadmn @ nih.ernet.in	211
243258	
Building Name :	

S. B. Khan
11-6-11

Remarks (if any)			
Language Known Hindi			
		Read	Write
Indian Languages Known		Speak	
1	Hindi	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
2		<input type="checkbox"/>	<input type="checkbox"/>
3		<input type="checkbox"/>	<input type="checkbox"/>
4		<input type="checkbox"/>	<input type="checkbox"/>
5		<input type="checkbox"/>	<input type="checkbox"/>
Foreign Lang. Known			
1	Nil	<input type="checkbox"/>	<input type="checkbox"/>
2		<input type="checkbox"/>	<input type="checkbox"/>
3		<input type="checkbox"/>	<input type="checkbox"/>
Address Details			
Permanant Address	Sri Ram Prasad H.No. 449, New Adarsh Nagar	City	Roorkee
	State/UT	Uttarakhand <input type="checkbox"/>	Pin Code
			247667
Present Contact Address	do	City	do
Same as Above	State/UT	do <input type="checkbox"/>	Pin Code
	Phone (Off)		Fax
	Phone (Res)		Mob No
	E-Mail (Mandatory)		7895634558