

प्रशा. अनु. रा. के. रा. / Adm. Section, NIFF

हायरी नं./Diary No. 1386

दिनांक/Date 30/06/15

ER Sheet Data Entry Form

Basic Data									
Officer ID No. Details									
Service	CSS	Cadre		Sub Cadre		Id No.	will be allotted by CS Division, LNR		
						1396			
Select List Year (Allot Year)									
Name Details									
Title	First Name		Middle Name		Sur Name				
	SADASHIV		RAMAPPA		MAJALATTI				
Initials									
CSL No./SCSL No. (if known)									
Sex	<input checked="" type="radio"/> Male	<input type="radio"/> Female	Date of Birth	22/07/1965	Date of Retirement	31/7/2025			
Community		SC		Religion	HINDU				
Father's Name		RAMAPPA . G. MAJALATTI							
Birth Details									
Birth Place	KAROSHI		Birth State/UT	KARNATAKA	Nationality	INDIAN			
Birth District	BELGAUM		Mother Tongue	KANNADA					
Domicile	KARNATAKA		Physically Handicap Status	-					
Blood Group	AB+		Identification Marks	A MOLE ON LEFT PALM					
Marital Details									
Marital Status	MARRIED		Spouse Name	SUMITRA					
Spouse Nationality	INDIAN								
Joining Details									
Source of Recruitment	DIRECT		Joining Date	12/9/1995	Retirement Details	July 2025			
Departmental Examination Details									
	Level		Year		Rank				
1	/		/		/				
2	/		/		/				
3	/		/		/				

Sh. Kulkarni

30/6/15

1/1

Detail of deputation (if applicable)

Name of the office	Post held at that time in parent office	Name of post (selected for deputation)	Period of deputation	
			Since	From

Detail of Foreign visit

Sl. No.	Place of visit	Date of visit	Post held at that time	Weather it is a personal or official visit	Detail of visit

Transfer/Posting detail (if applicable)

Place	Period of posting	
	Since	From
BELGAUM	1995	BELGAUM

Qualification (Use extra photocopy sheets for mult qualification, experience, training, awards details)					
Qualification		Discipline		Specialization 1	
BA					
Year	Division	CGPA	Specialization 2		
Institution		University		Place	Country
DHARWAD STUDY CENTER		MYSORE UNIVERSITY		DHARWAD	INDIA
Experience					
Type of Posting			Level		
PERMANENT <input checked="" type="checkbox"/>			GROUP C <input checked="" type="checkbox"/>		
Designation			Present Position		
UPPER DIVISION CLARK <input checked="" type="checkbox"/>			UPPER DEVISION CLARK <input checked="" type="checkbox"/>		
Ministry			Department		
WATER RESOURCES			NATIONAL INST OF HYDROLOGY		
Office			Place		
HRRC, NIH, BELGAUM			BELGAUM		
Experience Subject			Period of Posting		
Major		Minor		From	To
				12-9-1995	Till date
Note:-Refer the Annexure to fill above Major, Minor Subjects and below givan training subject					
Training					
NIL					
Training Year	Training Name		Training Subject		
Level	Institute Name, Place		Field Visit Country	Field Visit Place (within India)	
<input checked="" type="checkbox"/>					
Sponsoring Authority		Period of Training		Duration	Result
		From	To	(in Weeks)	<input type="radio"/> Qualified <input type="radio"/> Not Qualified
Awards/Publications					
NIL					
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
					<input checked="" type="checkbox"/>

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 : 22/6/2015 Place : BELGAUM

Information checked and verified - by

S.R. Majalatti
Signature of Officer
(S.R. Majalatti)

Section Officer	<i>Sr.</i>	Ministry/Department	
E-mail Id	<i>soadmn@nih.crndia</i>	Room No.	211
Phone No.	249258	Wing No.	
		Building Name	

Remarks (if any)					
Language Known					
		Read	Write	Speak	
Indian Languages Known	1	KANNADA	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>
	2	HINDE	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>
	3	MARATHI	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" 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	ENGLISH	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" 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	plot no. 562, Muralidhar Colony 3rd stage, Hanuman Nagar		City	BELGAUM
	State/UT	KARNATAKA <input type="checkbox"/>	Pin Code	590019
Present Contact Address	plot no. 562 Muralidhar Colony 3rd stage, Hanuman Nagar		City	BELGAUM
	State/UT	KARNATAKA <input type="checkbox"/>	Pin Code	590019
	Phone (Off)	0831-2447714	Fax.	0831-2447269
	Phone(Res)	0831-2448029	Mob No	9448160899
	E-Mail (Mandatory)	majalatti's@gmail.com		