

प्रशा.अनु.सं.सं.सं./Admn. Section, NIM

कार्य सं./Diary No...1300.....

दिनांक/Date...15/06/15.....

9/9

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details **0436**

Service	CSS	Cadre	Sub Cadre	Id No.	will be allotted by CS Division, LNR
Select List Year (Allot Year)					

Name Details

Title	First Name	Middle Name	Sur Name	Initials	
	BILCHAN	PRASAD	JUYAL	JPS	
CSL No./SCSL No: (if known)					
Sex	<input checked="" type="radio"/> Male <input type="radio"/> Female	Date of Birth	09-6-1958	Date of Retirement	30-6-2018
Community		Genral	Religion	Hindu	
Father's Name		Late Sh. Gils Ram			

Birth Details

Birth Place	Bareilly	Birth State/UT	U.P.	Nationality	Indian
Birth District	Bareilly	Mother Tongue	Hindi		
Domicile		Physically Handicap Status	NO		
Blood Group	O+	Identification Marks	A black mole on Rt Hand Middle finger		

Marital Details

Marital Status	Married	Spouse Name	Smt - Sarej Juyal
Spouse Nationality	Indian		

Joining Details

Source of Recruitment	By Interview	Joining Date	23-03-1999	Retirement Details	
-----------------------	--------------	--------------	------------	--------------------	--

Departmental Examination Details

	Level	Year	Rank
1			
2			
3			

Sh. Kulkarni
15/6

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	Whether it is a personal or official visit	Detail of visit

Transfer/Posting detail (if applicable)

Place	Period of posting	
	Since	From
Roorkee		
Roorkee	2005	SAGAR (M.P.)

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

Qualification		Discipline		Specialization 1	
High School					
Year	Division	CGPA		Specialization 2	
1974	III				
Institution		University		Place	Country
UP Board					

Experience

Type of Posting		Level			
Designation		Present Position			
SCD-II		SCD-II			
Ministry		Department			
MOWR, RAEGR		NIH			
Office		Place			
NIH		Roostee			
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	Driver Refreshment Training		Refresher		
Level	Institute Name, Place		Field Visit Country	Field Visit Place (within India)	
	IDTR, Jharkhand, D. Deem				
Sponsoring Authority	Period of Training		Duration	Result	
	From	To	(in Weeks)	<input checked="" type="radio"/> Qualified <input type="radio"/> Not Qualified	
	15-04-15	16-04-15			

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: 15-6-15 Place: Roostee

Information checked and verified - by

Signature of Officer

Section Officer	<i>[Signature]</i>	Ministry/Department			
E-mail Id	soadm@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	English	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	
	2	Hindi	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	
	3		<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
	4		<input type="checkbox"/> <input type="checkbox"/>	<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"/>	<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"/>	<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"/>	<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"/>	<input type="checkbox"/> <input type="checkbox"/>	
Address Details							
Permanant Address	Vill-Rithadhari P.O-Bangar Patti-Sabli Distt-PAURI-GARHWAL UTTARANCHAL			City PAURI			
	State/UT	<input type="checkbox"/>	Pin Code	247368 246275			
Present Contact Address	D-306 Subash Nagar Roorkee			City Roorkee			
	State/UT	<input type="checkbox"/>	Pin Code	247667			
	Phone (Off)		Fax				
	Phone(Res)		Mob No	9760992228			
	E-Mail (Mandatory)						