

प्रशा.अनु.राज.रा.स.रा./Admn. Section, NIH

इयरी नं./Diary No. 1321

दिनांक/Date 18/06/15

1321

ER Sheet Data Entry Form

Basic Data

Officer ID No. Details

0451

Service CSS Cadre

Sub
Cadre

Id No.

1451

will be allotted by CS
Division, LNRSelect List Year (Allot
Year)

Name Details

Title

First Name

Middle Name

Sur Name

Smt.



ANITA

DHYANI

Initials

Ad

CSL No./

SCSL No: (if known)

Sex



Male



Female

Date of Birth

15.04.1974

Date of Retirement

30.4.2034

Community

GEN.

Religion

HINDU

Father's Name

REWADHAR MADHWAL

Birth Details

Birth Place

DEHRADUN

Birth State/UT

U.K.

Nationality

INDIAN

Birth District

DEHRADUN

Mother Tongue

HINDI

Domicile

UTTARAKHAND

Physically Handicap Status

-

Blood Group

O⁺

Identification Marks

CUT MARK ON LEFT THUMB

Marital Details

Marital Status

MARRIED

Spouse Name

Late RAVINDAR KUMAR
DHYANI

Spouse Nationality

INDIAN

Joining Details

Source of
RecruitmentON COMPANTATION
GROUNDJoining
Date

15.10.2010

Retirement
Details

30.04.2034

Departmental Examination Details

Level

Year

Rank

1

2

3

Sh. Kotwal

18/6

1/4

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

Qualification (Use extra photocopy sheets for multi qualifications, experience, training, awards details)			
Qualification	Discipline		Specialization 1
GRADUATE	ART		
Year	Division	CGPA	Specialization 2
2010	II		
Institution	University	Place	Country
METHODIST DEGREE COLLEGE KORRKEE	H.N.B.G. UNIVERSITY, SRINAGAR UK	SRINAGAR	INDIAN

Experience

Type of Posting	Level	Group 'c'
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Designation	Present Position	
MTS (Watch & Word)	MTS (NEW)	
Ministry	Department	
MOHR, RDB GR	National Institute of Psychology	
Office	Place	
	Roosky	
Experience Subject	Period of Posting	
Major	Minor	From To
<input checked="" type="checkbox"/>		

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)	
<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

Type of Activity :	<input type="radio"/> Academic	<input type="radio"/> Non Academic		
Activity Area	Activity Subject	Activity Title		
<input checked="" type="checkbox"/>				
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: 18-5-15 Place: RKE

Information checked and verified - by

Signature of Officer

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

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Remarks (if any)							
Language Known							
			Read	Write	Speak		
Indian Languages Known	1	HINDI	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
	2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Foreign Lang. Known	1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Address Details							
Permanant Address		VIKAS NAGAR, VIDHYAPEETH MARG DEHRADUN		City	DEHRADUN		
	State/UT	UTTARAKHAND <input checked="" type="checkbox"/>		Pin Code			
Present Contact Address		SHIVPURAM PANIYALA ROAD ROORKEE		City	ROORKEE		
	State/UT	UTTARAKHAND <input checked="" type="checkbox"/>		Pin Code	247667		
	Phone (Off)	01332249282		Fax.			
	Phone(Res)	-		Mob No	07417762910		
	E-Mail (Mandatory)						