New Registration Profile Update

Employee’s Basic Information :

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| Title / Name : |  | Date of Birth : |  |
| Category (Gen/EWS/OBC/SC/ST): |  | Whether Ex-servicemen (Yes/No) : |  |
| Whether PH (Yes/No):If, yes, whether OH/HH/VH/Multiple: |   | Qualification : |  |
| Father's Name : |  | Gender : |  |
| Address : |  | Hometown : |  |
| Mobile : |  | Email : |  |
| Physical Handicapped : | Yes / No | Home State : |  |

Department Information :

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| Employee No. : |  |
| CCIT/DGIT : |  | CIT/DIT Charge |  |
| Hqrs/ Range: |  | Station : |  |
| Circle/Ward : |  | Joining on Present Station : |  |
| Current Designation : |  | Date of Appointment on Present Post:  |  |
| Initial Recruitment as:(Designation) |  | Mode of Recruitment:(SSC/Compassionate/ICT/Loan/Sports/Absorption/Others) |  |
| Date of joining in the Department/ NWR: |  | Civil List / Seniority No : |  |
| Need Transfer: | Yes / No |  State Allocated (for MTS only): |  |
| Duration of stay on Present Station : | Years : | Months : |

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| **Departmental Examination Passed :** |
| 1) Examination : | ITO | Date of Passing : |
| 2) Examination : | ITI | Date of Passing : |
| 3) Examination : | Sr.TA | Date of Passing : |
| 4) Examination : | TA | Date of Passing : |

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| **Preference for Places of Posting (if transferred out) :** |
| 1) Station Choice : |  | Reason |  |
| 2) Station Choice : |  |
| 3) Station Choice : |  |

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| **Posting Details****(From the Date of Joining to till date)** |
| **F.Y.** | **Office of Posting** | **Designation** | **Station Of****Posting** | **Assigned Duties** | **Asstt/****Non Asstt** | **Joining****Date** | **Releving****Date** |
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# Declaration by the DDO

It is hereby certified that I have carefully verified the service particulars and posting details of Sh/Smt/Ms , Civil Code/ Employee Id:

 posted as in the charge of from the service book. It is also certified that the joining & relieving dates are correctly mentioned against each and every posting of the Officer/Official mentioned in her/his profile and all the pages of profile have been duly attested by the undersigned.

# Date : (Attested by the DDO)