

EMPLOYEE INFORMATION  
PROFORMA – II  
(To be filled using English CAPITAL LETTERS only)

Paste Recent  
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OFFICE NAME: \_\_\_\_\_

1. EMPLOYEE NAME: \_\_\_\_\_

2. DESIGNATION: \_\_\_\_\_

3. SEX

☐

MALE

☐

FEMALE

☐

OTHER

4. SALARY DETAILS

GRADE: \_\_\_\_\_

BASIC PAY: \_\_\_\_\_

Pay Matrix Level: \_\_\_\_\_

(Note: Fill contractual in case of contractual employee in Grade)

5. DATE OF RETIREMENT: \_\_\_\_\_

6. POSTING BLOCK NAME: \_\_\_\_\_

7. MOBILE NUMBER: \_\_\_\_\_

8. BLOOD GROUP

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Group

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Rh factor (+/-)

9. PRESENT RESIDENTIAL ADDRESS: \_\_\_\_\_

10. HOME BLOCK NAME: \_\_\_\_\_ HOME DISTRICT: \_\_\_\_\_

FILL BELOW THE NUMBER AND NAME OF ASSEMBLY CONSTITUENCY (AC) WHERE –

|                           | AC No. | AC Name                      |
|---------------------------|--------|------------------------------|
| 11. POSTED                |        |                              |
| 12. HOME                  |        |                              |
| 13. PRESENT RESIDENCE :   |        |                              |
| 14. YOUR NAME IS ENROLLED |        | AC Name: _____               |
|                           |        | Part Number: _____           |
|                           |        | Sr. No. in Voter List: _____ |
|                           |        | Booth No. _____              |
|                           |        | Booth Name: _____            |
|                           |        | EPIC No. _____               |

OTHER DETAILS

15. Bank Detail:-

Bank Name

Bank Branch

IFSC code

Account No.

16. Pay ID :

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If yes, Please Provide ID No :- .....

17. IS POSTED FOR 3 YEARS OR MORE IN THE LAST 4 YEARS IN THE SAME DISTRICT :

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18. DATE OF JOINING IN THE DISTRICT: \_\_\_\_/\_\_\_\_/\_\_\_\_

19. Is BLO :

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YES

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NO

If Yes Then BLO AC Name \_\_\_\_\_ Part No. \_\_\_\_\_

20. Is PwD (Person with disability):

YES

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NO

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If Yes Then % \_\_\_\_\_

21. Is Teacher:

YES

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22. Is Gazetted Officer :

YES

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NO

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23. REMARKS : \_\_\_\_\_

Signature of Head of the office with seal