Department Name:													Department Name:										
Basic Employee Detail								File		Post Hierarchy			Other Details of Employee						for esign				
Filed No.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
Sr. No	Title	Employee Full Name	Gender	Employee Code	Designation of employee	NIC Email	Name of Organization Unit (Branch Name)	Post Name	Marking Abbreveation	Parent OU	Name of Reporting Officer	Reporting marking abbr. (Parent Post)	Remark (If Additional Post)	Joining Date at Organisation	Date of Birth	Joining date of service	Employee Status(Permanent/Temporary)	Working Status (Retired/Transferred/Serving)	Office Phone	Permanent Address	Present Address	Aadhaar No	Mobile No