

**PANCHAYAT ELECTIONS 2020**  
**INPUT PROFORMA FOR FILLING UP THE EMPLOYEE DETAILS (Master Data Collection)**

Department : \_\_\_\_\_  
 Controlling Officer Name and Mobile Number :- \_\_\_\_\_  
 Office Address with telephone number :- \_\_\_\_\_

Controlling Officer Designation :- \_\_\_\_\_

| S.No | EMPLOYEE NAME | AGE | DESIGNATION | PAY LEVEL | BASIC PAY | CATEGORY<br>(GAZETTED/<br>NON-<br>GAZETTED)<br>G/NZ | PLACE OF<br>POSTING | BIRTH  |                | POSTING |             | RESIDENCE |                | PRESENT<br>ADDRESS | MOBILE NO. | POSTED<br>AS BLO<br>(Y/N) | URDU<br>KNOWING<br>(Y/N) | ELECTION<br>CARD ID | REMARKS |
|------|---------------|-----|-------------|-----------|-----------|---|---------------------|--------|----------------|---------|-------------|-----------|----------------|--------------------|------------|---------------------------|--------------------------|---------------------|---------|
|      |               |     |             |           |           |   |                     | TEHSIL | BLOCK<br>/WARD | TEHSIL  | BLOCK /WARD | TEHSIL    | BLOCK<br>/WARD |                    |            |                           |                          |                     |         |
| 1    | 2             | 3   | 4           | 5         | 6         | 7   | 8                   | 9      | 10             | 11      | 12          | 13        | 14             | 15                 | 16         | 17                        | 18                       | 19                  | 20      |
|      |               |     |             |           |           |   |                     |        |                |         |             |           |                |                    |            |                           |                          |                     |         |
|      |               |     |             |           |           |   |                     |        |                |         |             |           |                |                    |            |                           |                          |                     |         |
|      |               |     |             |           |           |   |                     |        |                |         |             |           |                |                    |            |                           |                          |                     |         |

**Note :-**

1. All Fields are mandatory don't skip any field.
2. While data entry do not merge any field. Use wrap text and row autofit to fit in long entries.
3. Handicapped and female staff need not be entered.
4. Soft Copy of this format available at [pulwama.gov.in](http://pulwama.gov.in) and in the office of NIC DC Office Pulwama.
5. Soft copies may be sent to [dcpul-jk@nic.in](mailto:dcpul-jk@nic.in), [pulwama@nic.in](mailto:pulwama@nic.in), [entpulwama@nic.in](mailto:entpulwama@nic.in)
6. Soft copies can also be sent in CDs/DVDs.
7. Both hard (signed and stamped ) and soft copies to be submitted.
8. Employees having critical illnesses like Carcinoma, Cancer, Parkinsonism etc may be mentioned in remarks column.
9. Do not enter staff like Drivers, Gardeners, Plumbers or any illiterate staff that cannot be deployed for Election duty.
10. Data not in prescribed format will not be accepted.