

Personal Data Sheet (PDS)

General Instructions :

1. Please fill-up the form in Block Letters, if not otherwise specified. Please ensure that the writing is legible.
2. Information which is not known, please skip.
3. For any data, add more sheet, if necessary.
4. Type of Post (Sl. No.3):
1.Cadre(C),2.Revenue Permanent (R),3.Revenue Temporary (RT),4.Development (D).
5. Category of Class (Sl. No.4):
1. Class-I, 2. Class-II, 3. Class-III, 4. Class-IV
6. For Religion (Sl. No. 12):
1. Islam (I), 2. Hindu (Hi), 3. Buddhist (Bu), 4. Christian (Ch), 5. Others ((O).
7. Marital Status (Sl. No. 13):
1. Single (S), 2. Married (M), 3. Widow (W), 4. Divorced (D). 5. Separated (Se)
8. Sex (Sl. No.6):
1. Male 2.Female

A. PERSONAL DATA :

1. Personal Data on (date) :

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 (Day) (Month) (Year) 2. Serial No. in Gradation List

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3. Type of Post :

C	R	RT	D
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 (Tick marks only) 4. Category of Class

I	II	III	IV
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 (Tick marks only)
5. Name English :
(Capital Letter)
Bangla :
6. Sex :

M	F
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7. Father's Name :
8. Mother's Name :
9. Date of Birth:

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 (Day) (Month) (Year) 10. Date of 1st Appointment :

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 (Day) (Month) (Year)
11. Permanent Address :
Vill/House & Road No. :
- Post Office : Postal Code :

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- Thana/Upazila : District :
12. Religion :

I	Hi	Bu	Ch	O
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 13. Marital Status :

S	M	W	D	Se
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14. Spouse Information :

- Name : ID No. :

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(if working)

Spouse Occupation : HW

GS	B	PS	O
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(Tick marks only)

(HW-Housewife, GS- Government Service, B- Business, PS- Private Service, O-Others)

Designation :

Place of Posting :

Department/Organization :

15. Number of Children

B. EDUCATION INFORMATION :

Sl. No.	Level of Education	Board/ University/ Institute(for higher Study)	Country	Subject/ Discipline	Division/ Class	Year
a)	S.S.C/O Level/Dakhil/ Equivalent		NOT APPLICABLE			
b)	H.S.C/A Level/ Alim/ Equivalent		NOT APPLICABLE			
c)	Diploma(Nursing/Paramedical/ Other's)		NOT APPLICABLE			
d)	Graduation: (B.A/B.Sc/BSS/Nursing/Fazil/Others)					
e)	MBBS /BDS/Engineering Degree					
f)	Masters Degree(M.A/M.Sc./M.Com./Kamil)					
g)	Post graduate (Diploma)					
h)	Post graduate (Degree)					

C. REGISTRATION INFORMATION :

Sl. No.	Name of the Professional Body*	Registration Number	Year	Last renewal year
1				
2				
3				

* BMDC/Nursing Council/IEB/Bangladesh Computer Society/Pharmacy Council/State Medical Faculty/etc.

D. SERVICE INFORMATION :

1. Present Posting :

Designation :

Designation Status (if any) :

(1-Regular, 2-Current Charge, 3- In Charge, 4-Deputation (Working), 5-Deputation (Study), 6-OSD, 7-Lien, 8-Study leave, 9- Against the Post, 10- Fixed Pay, 11-Contract)

Institute / Place of Posting :

Date of Joining :

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(Day) (Month) (Year)

2. Pay Scale/Grade No. (Present) : Basic Pay (Present) :

Date of Next Increment :

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(Day) (Month) (Year)

3. Date of In-service Training/ Internship : Sl. No.
 (Only for Doctor's) (Day) (Month) (Year)

4. Date of Ad-hoc Appointment : Sl. No.
 (if any) (Day) (Month) (Year)

5. Date of Regular Appointment : Sl. No.
 (PSC, if any) (Day) (Month) (Year)

E. SERVICE PARTICULARS(Posting/Deputation/Lien)(In ascending order up to present posting):
(Use Extra sheet if need)

Sl. No	Designation	Designation Status*	Office/ Organization/ Institute	Joining Date	Release Date

* (1-Regular, 2-Current Charge, 3- In Charge, 4-Deputation (Working), 5-Deputation (Study), 6-OSD, 7-Lien, 8-Study leave, 9-Against the Post, 10- Fixed Pay, 11-Contract)

F. PROMOTIONS (ascending order):

Sl. No.	Date			G.O. No. (From Ministry)	Sl. No. in the Govt.	Promoted Post	Pay Scale
	(Day)	(Month)	(Year)				

G. TRAINING PARTICULARS:

1. Local Training (applicable for two weeks and above) :

Sl. No.	Name of Course/ Subject	Name of Institute/Venue	Duration (Date)		Remarks (if any Diploma/Degree/ Others obtained)
			From	To	

2. Foreign Training :

Sl. No.	Name of Course/ Subject (Study tour/Seminar, etc.)	Sponsoring Agency	Name of Institute	Duration (Date)		Remarks (if any Diploma/Degree/ Others obtained)
				From	To	

Date :

Signature of Person

H. DISCIPLINARY ACTION/CRIMINAL PROSECUTION (Filled-up by the controlling officer)

Sl. No.	Nature of Offence	Punishment Type	Government Order No. & Date

I. ACR Monitoring System (Filled-up by the Competent Authority)

Sl. No.	Marks Obtained (RO)	Year	Remarks

Date :

Signature of Controlling Officer
(Office Seal)