

**PROFORMA ON REQUEST FOR NEW HRMS ID / CFMS ID**  
**(APPLY IN PAYROLL HERB & ADD EMPLOYEE REQUEST IN MASTER DATA OPTION)**

(\* Mark Fiedls are Filled Mandatory)

**BASIC & PERSONAL DETAILS**

- 1.\*Title (Prof./Dr./Ms./Mr./Mrs) : \_\_\_\_\_
- 2.\* Employee First Name : \_\_\_\_\_
- 3.\* Surname Name : \_\_\_\_\_
- 4.\* Father Name : \_\_\_\_\_
- 5. CFMS ID : \_\_\_\_\_
- 6. HRMS ID : \_\_\_\_\_
- 7. CPS NO. : \_\_\_\_\_
- 8.\* Date of Birth : \_\_\_\_\_
- 9.\* Date of Joining into Govt.Service : \_\_\_\_\_ F.N / A.N
- 10.\* Date of Joining into Present Post : \_\_\_\_\_ F.N / A.N
- 11.\* Gender : Male / Female / Transgender
- 12.\*Marital Status : Un-Married / Married /Widow / Divorsed
- 13.\* Degree of Chanllenge % (PHC) : \_\_\_\_ % ( OR ) Not Applicable
- 14.\* Aadhar Number : \_\_\_\_\_
- 15.\* PAN Number : \_\_\_\_\_
- 16.\* Bank Account Number : \_\_\_\_\_
- 17.\*Bank IFSC Code : \_\_\_\_\_
- 18.\*Bank And Branch : \_\_\_\_\_

**OFFICE DETAILS**

- 19.\* D.D.O. Code : \_\_\_\_\_
- 20.\* STO Code : \_\_\_\_\_
- 21.\* Org. Unit /Office Name : \_\_\_\_\_
- 22.\* Position Post Name : \_\_\_\_\_
- 23.\* HOA : 2202-01-103-00-05-010-011 / 2202-02-191-00-05-010-011
- 24.\*HRMS Designation Code : \_\_\_\_\_
- 25.\* Department : \_\_\_\_\_
- 26.\*HRA Code : 1007
- 26.\* Office Level :Head Office / State / Multizone / Zone / Dist. / Local

## EMPLOYMENT & PAY DETAILS

27. Approval Authority : \_\_\_\_\_

28. Sanctioned G.O.NO. : \_\_\_\_\_

29. G.O. Date : \_\_\_\_\_

30.\* Employee Group : AIS / GAZETTED / NGO / LAST GRADE EMP.

31.\* Employee Sub Group : Temporary / Probationer / Approved Probationer

32.\* Reason for Adding Employee : Joining

33. Sub-Reason for Adding Employee : Recruitment / Existing Vacancy / Com.Appointment

34.\* Pay Type : Regular

35.\*Addl.Information Reason Test : FN / AN

36.\* PRC TYPE : STATE

37.\*PRC CATEGORY : 2022

38.\*Pay Scale Group / Grade : \_\_\_\_\_

39.\* Basic Pay : \_\_\_\_\_

40.\*DA CATEGORY : \_\_\_\_\_ %

41.\* HRA CATEOGORY : \_\_\_\_\_ %

42.\*Payroll Area : CFMS-Initial / CFMS- Regular / Pensioners / AIS

## ADDRESS

43.\* State : ANDHRA PRADESH

44.\* District : \_\_\_\_\_

45. Mandal : \_\_\_\_\_

46. Village : \_\_\_\_\_

47. Street Name : \_\_\_\_\_

48.\* Postal Code : \_\_\_\_\_

49. House No. / Flat No. : \_\_\_\_\_

50. Landa Mark : \_\_\_\_\_

51.\* MOBILE Number : \_\_\_\_\_

52.\* E-Mail Address : \_\_\_\_\_

\* UPLOAD DOCUMENTS \*\* : 1) Appointment Order Copy 2) BANK Pass Book  
3) AADHAR Card 4) PAN Card 5) Others

HRMS ID, If available (7 digits) : YES / NO

DECLARATION: I hereby Certified that the individual is admitted to duty and I found correct with personal details of the candidate with the documents produced by him.

SAVE-NEXT

Select Bio Metric Device

Authenticate

Submit.

Signature of the DDO

Signature of the Employee.

STUAP