

**HIGH COURT OF JAMMU & KASHMIR and Ladakh, JAMMU**

**Office of Registrar Judicial, Jammu**

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**ORDER**

No.: 310/ACCTS/RJ/2021

Dated:16.12.2021

It is hereby notified for the information of all concerned that this office is required to update employee information online in the JK-CPIS website, comprising 07 nos of forms (**enclosed herewith**), as mandated by NIC, Secretariat, as such, it is hereby enjoined upon all officials/officers posted in High Court Wing, Jammu to submit each form duly signed and complete in all respects (**including email**), along with the following documents, in the Accounts Section by or before 20-12-2021 positively.

1. Copy of Appointment order.
2. Copy of all promotions orders.
3. Copy of first page of service book
4. Copy of transfer/posting order, if any.

**The officers/officials can download all forms to be filled from the official website of High Court.**

  
(S.P. Gandhi)

Registrar Judicial

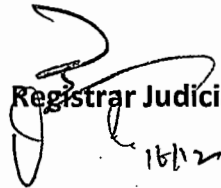
16/12

**No.: 8016/RJ/2021**

Dated:16.12.2021

Copy to:

1. Jt. Registrar (Judl/Protocol), High Court Wing, Jammu, for information.
2. All Addl Registrars/Secretaries/Jt. Registrars/Deputy Registrars/ARs/I/C section for information and with the request to circulate the circular among their staff for necessary compliance.
3. I/C NIC, High Court Wing, Jammu to upload the circular along with annexures for the purpose.
4. Office Copy.

  
Registrar Judicial

16/12





[Data Entry Forms](#) ▶ [Back To Home](#)

Welcome : ASSISTANT REGISTRAR HIGH COURT, J&K, JAMMU J (DCJLAW0016)

[Logout](#)

### Employee Details

DDO	ASSISTANT REGISTRAR HIGH COURT, J&K, JAMMU J --- DCJLAW0016			
Department	Law Department			
Field Department	Law Department			
Aadhaar No	<input type="text"/>	PRC File No	<input type="text"/>	
First Name*	<input type="text"/>	Last Name	<input type="text"/>	
DOB*	<input type="text"/>	Religion*	--Select-- ▼	
Birth Place District	--Select-- ▼	Service Type*	--Select-- ▼	
Father Name	<input type="text"/>	Mother Name	<input type="text"/>	
Category*	--Select-- ▼	Sub-Category	--Select-- ▼	
Nationality	INDIAN	Sex*	--Select-- ▼	
Blood Group	--Select-- ▼	Marital Status *	--Select-- ▼	
Spouse Name	<input type="text"/>	Spouse Profession	--Select-- ▼	
If spouse working in Govt. Department				
Spouse Department	--Select-- ▼			
Spouse Designation	--Select-- ▼			
Upload Photo	<input type="button" value="Choose File"/> No file chosen Image size should be 20 KB(Only JPEG Format)			
Save				

Website Designed, Developed and Hosted by National Informatics Centre, Jammu & Kashmir  
 Content Provided and Maintained by respective department of Government of Jammu & Kashmir.

**Government of Jammu and Kashmir  
Employee Personal Information**

**Form-2**

<b>Joining Details</b>			
Date of Appointment		Order No.	
Initial Joining Department		Initial Joining Office	
Date of Joining		Initial Designation	
Pay Band of initial Post *		Initial Grade Pay *	
Initial Basic Pay *		Permanent/Temporary Employee	
Employee initial cadre State/Div./Distt		Gaz./ Non-Gaz./ Class IV	
Present DDO Code*		* optional fields	
<b>Salary Details</b>			
Current Pay Band		PAN No.	
Grade Pay		Basic Pay	
Personal/Special Pay		GPF/ PRAN No.	
Dearness Allowance/ Dearness Pay/COLA <b>YES/NO</b>		Deduction Type <b>GPF/CPE(NPS)</b>	
Non-practicing Allowance(NPA) <b>YES/NO</b>		GIS/SLI Member <b>YES/NO</b>	
Charge Allowance <b>YES/NO</b>		GIS/SLI Number	
City Compensatory Allowance <b>YES/NO</b>		Defined Contributory Pension - 10% Employer's Share for NPS	
Medical Allowance <b>YES/NO</b>		2 ½ days Pay <b>YES/NO</b>	
Temporary Move Allowance <b>YES/NO</b>		Pocket Money <b>YES/NO</b>	
House Rent Allowance <b>YES/NO</b>		Settlement Allowance	
Risk Allowance <b>YES/NO</b>		Fixed T.A.	
Border Allowance/ Compensatory Allowance <b>YES/NO</b>		Record Allowance	
Ration Money Allowance <b>YES/NO</b>		Special Duty Allowance	
Hardship Allowance <b>YES/NO</b>		Any Other Allowance	
Kit Maintenance Allowance <b>YES/NO</b>			
Conveyance Allowance <b>YES/NO</b>		Total Salary(including Allowances)	
Name of Salary Bank Branch		Saving A/c No.	

Entitlement of Pension (Defined benefit/NPS)	
Contribution to NPS(Employer + Employee) :	
Accumulations under NPS (including earnings from investment of Contribution) :	

**Leave Details**

<b>Accumulations of Earned Leave</b>	<b>AS on Date</b>		
	<b>Total number of days EL accumulated</b>		
Period of EL availed (Recently) - <b>From:</b>		<b>To:</b>	
Number of times Maternity Leave availed:			
<b>Accumulations of Half Pay Leave</b>	<b>AS on Date</b>		
	<b>Total number of days accumulated</b>		
Period of HPL availed (Recently) - <b>From:</b>		<b>To:</b>	
Period of Suspension (if any)			
Major Penalty imposed, if any			
Monthly Income of Parents from all sources			

**Signature of employee :**  
Dated

**Signature of DDO :**  
**SEAL**  
Dated

**Government of Jammu and Kashmir  
Employee Personal Information**

**Form-3**

<b>Employee office details</b>			
Current Designation.		Current Post	
Current Cadre: State/ Div./ District		Current office	
<b>Present address</b>		<b>Permanent address</b>	
House No/ Street No		House No/ Street No	
Street Name		Street Name	
Place		Place	
Pin		Pin	
State		State	
District		District	
Tehsil		Tehsil	
Village		Village	
Phone No.		Phone No.	
Home Town		Home Town	

Mobile No.		Email address	
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<b>Whether Govt. accommodation allotted in Jammu/Srinagar :</b>	
<b>Details of accommodation, if hired(Y/N)</b>	

**Signature of employee**  
Dated

**Signature of DDO**  
**SEAL**  
Dated

**Government of Jammu and Kashmir  
Employee Personal Information**

**Form - 4**

<b>Educational Detail</b>				
<b>ACADEMIC QUALIFICATION</b>				
<b>Degree/Diploma</b>	<b>Name of Board/ University</b>	<b>Marks Obtained (In %)</b>	<b>Year of Passing</b>	<b>Grade</b>

<b>TECHNICAL QUALIFICATION</b>				
<b>Degree/Diploma</b>	<b>Name of Board/ University</b>	<b>Marks Obtained (In %)</b>	<b>Year of Passing</b>	<b>Grade</b>

<b>PROFESSIONAL QUALIFICATION</b>				
<b>Degree/Diploma</b>	<b>Name of Board/ University</b>	<b>Marks Obtained (In %)</b>	<b>Year of Passing</b>	<b>Grade</b>
<b>Specialized Training, if any</b>				
<b>Refresher/Training Course attended during service, if any</b>				

**Signature of Employee**  
Dated  
DDO

**Signature of**  
  
**SEAL**  
Dated

**Government of Jammu and Kashmir  
Employee Personal Information**

**Form-5**

<b>Promotion Details</b>			
<b>Date of Promotion</b>	<b>Name of the office</b>	<b>Designation</b>	<b>Govt. Order No./ Date</b>

**Signature of employee :**  
**Dated**

**Signature of DDO :**  
**SEAL**  
**Dated**



**Government of Jammu and Kashmir  
Employee Personal Information**

**Form - 6**

**Posting Details**

	Name of the office	Designation	Tenure of Postings	
			From	To
Initial appointment				
02 <sup>nd</sup> posting				
03 <sup>rd</sup> posting				
04 <sup>th</sup> posting				
05 <sup>th</sup> posting				
06 <sup>th</sup> posting				
07 <sup>th</sup> posting				
08 <sup>th</sup> posting				
09 <sup>th</sup> posting				
10 <sup>th</sup> posting				
11 <sup>th</sup> posting				
12 <sup>th</sup> posting				
13 <sup>th</sup> posting				
14 <sup>th</sup> posting				
15 <sup>th</sup> posting				
16 <sup>th</sup> posting				
17 <sup>th</sup> posting				

**Signature of employee :  
Dated**

**Signature of DDO :  
SEAL  
Dated**

**Government of Jammu and Kashmir  
Employee Personal Information**

**Form - 7**

<b>Nomination Details (GPF)</b>			
<b>Name of Nominee(s)</b>	<b>Relationship with employee</b>	<b>Date of Birth of Nominee</b>	<b>Share of amount (%)</b>
<b>Nomination Details (Gratuity)</b>			
<b>Name of Nominee(s)</b>	<b>Relationship with employee</b>	<b>Date of Birth of nominee</b>	<b>Share of amount (%)</b>
<b>Group Insurance/SLI Nominee Details</b>			
<b>Name of Nominee(s)</b>	<b>Relationship with employee</b>	<b>Date of Birth of nominee</b>	<b>Share of amount (%)</b>
<b>Nominee Details ( Family Pension )</b>			
<b>Name of Nominee(s)</b>	<b>Relationship with employee</b>	<b>Date of Birth of nominee</b>	

**Declaration by the prospective employee**

The information furnished by me in this joining report is correct to the best of my knowledge and are based on valid documents. I also hereby produce original documents in respect of all the information given below before the reporting officer for verification. I am also aware of the fact that penal action would be taken against me if any of the information provided by me is found fraudulent.

**Signature of Employee  
Dated**

**VERIFICATION**

**Signature of DDO  
SEAL  
Dated**