

## EMPLOYEE BACKGROUND VERIFICATION FORM

### COMPANY NAME: INDIVIDUAL

Please note that it is mandatory for you to complete the form in all respects. The information you provide must be complete and correct and the same shall be treated in strict confidence.

The details on this form will be used for all official requirements you should join the organization.

Position Applied for	Job Location

### Personal Information

Name of the Candidate(As per Government Identity proof)		Pancard Number	Aadhar Number
NAGISHETTY RAKESH		BBRPN4867K	513520487510
Father's Name		Date of Birth(dd/mm/yy)	Husband's Name
ASHOK		23-10-1995	
Gender	Mobile Number	Nationality	Marital Status
MALE	9866191534	INDIAN	Married

**Previous Employment History - Please attach a copy of your relieving letter/service certificate**

Note: Please ensure that you are descriptive wherever necessary – e.g. If company has closed, do mention it. Employee Code/ ID/ Number is mandatory. If your previous employer did not provide one, please mention and state reasons for the same.

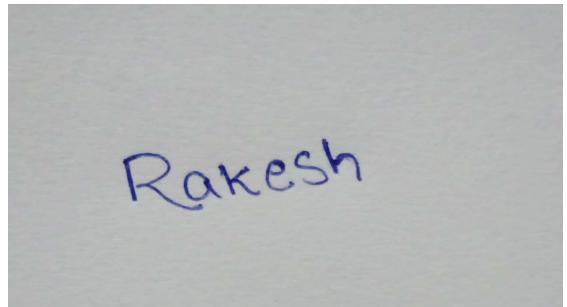
<b>Employment Type</b> : Experienced	<b>Overall years of experience</b> : 3	<b>No. of employments</b> : 4	
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<b>LAST EMPLOYMENT</b>		Job Location	
Atos Syntel		Bangalore	
Telephone No	Employee Code	Designation	Department
	75087702	Associate Consultant	101260012635
Employment Period		Reporting Manager's Name	
From	To	Amit Deshmuk	Reporting Manager's Contact No
09-03-2022	22-11-2023		Reporting Manager's Email ID
			amit.2.deshmukh@eviden.com
Duties & Responsibilities		Reasons for Leaving	
		Medical Emergency	
HR Name		HR Contact No	HR Email ID
Deshna Jain		9168279818	deshna.jain@eviden.com
First Salary Drawn	Was this position Permanent Temporary Contractual	Agency Details(if temporary or contractual), provide details	
Last Salary Drawn			
840000			
<b>Please tick mark the documents for this employment</b> <input type="checkbox"/> Resignation Acceptance <input type="checkbox"/> Relieving Letter <input type="checkbox"/> Latest 3 months pay slip			

**Declaration & Authorization**

I hereby authorize GoldQuest Global HR Services Pvt Ltd and its representative to verify information provided in my application for employment and this employee background verification form, and to conduct enquiries as may be necessary, at the company's discretion. I authorize all persons who may have information relevant to this enquiry to disclose it to GoldQuest Global HR Services Pvt Ltd or its representative. I release all persons from liability on account of such disclosure.

I confirm that the above information is correct to the best of my knowledge. I agree that in the event of my obtaining employment, my probationary appointment, confirmation as well as continued employment in the services of the company are subject to clearance of medical test and background verification check done by the company ..

Rakesh N		20-12-2024
<b>Full name of the candidate</b>	<b>Signature</b>	<b>Date of form filled</b>