

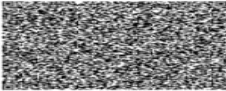
# Background Verification Form

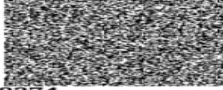
Company name: AML Rightsource India Pvt Ltd - AMRSN 2025 Purpose of Application: NORMAL BGV(EMPLOYMENT)

## Applicant's CV

[View Document](#)

Govt ID #1

भारत सरकार Government of India	
<b>भारतीय विशिष्ट पहचान प्राधिकरण</b> Unique Identification Authority of India	
नामांकन क्रम/ Enrolment No.: 2728/78963/43421	
To Aryan Mangal C/O: Brijesh Mangal, Jagori, VTC, Jagori-Dehat, PO: Jagori, Sub District: Kheragarh, District: Agra, State: Uttar Pradesh, PIN Code: 283115, Mobile: 7055665300	
	
आपका <b>आधार</b> क्रमांक / Your <b>Aadhaar</b> No. : <b>XXXX XXXX 8374</b> VID : 9157 6829 9028 7449	
<b>मेरा आधार, मेरी पहचान</b>	
	
आर्यन मंगल Aryan Mangal जन्म तिथि/DOB: 07/07/2002 लिंग/ GENDER: MALE	
<small>आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। आधार जन्म का प्रमाण नहीं है, नागरिकता या जन्मतिथि का प्रमाण नहीं है। Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).</small>	
<b>XXXX XXXX 8374</b> <b>मेरा आधार, मेरी पहचान</b>	

सूचना / INFORMATION	
<ul style="list-style-type: none"><li>आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। जन्मतिथि का प्रमाण केवल आधार के माध्यम से ही प्राप्त किया जा सकता है।</li><li>इस आधार पर को नुमाइशगारी द्वारा नियुक्त प्रमाणिकरण प्रणाली के लिए अनिवार्य प्रमाणिकरण के द्वारा सत्यापित किया जाना चाहिए या ऐप स्टोर में उपलब्ध एमआधार या आधार क्यूआर कोड स्कैनर ऐप से क्यूआर कोड को स्कैन करके या <a href="http://www.uidai.gov.in">www.uidai.gov.in</a> पर उपलब्ध मुद्रित क्यूआर कोड रीडर का उपयोग करके सत्यापित किया जाना चाहिए।</li><li>आधार विशिष्ट और सुरक्षित है।</li><li>पहचान और वोट के सम्बंध में दस्तावेजों को आधार के लिए नामांकन की तारीख से पचास 10 वर्षों में कम से कम एक बार आधार में अपडेट करना चाहिए।</li><li>आधार विशिष्ट सरकारी और गैर-सरकारी पत्राचार/संचारों को प्राप्त करने में सहायता करता है।</li><li>आधार में अपना मोबाइल नंबर और ईमेल आईडी अपडेट रखें।</li><li>आधार सेवाओं का लाभ लेने के लिए एमआधार ऐप डाउनलोड करें।</li><li>आधार/बयोमेट्रिकल लॉक/अनलॉक सुविधा का उपयोग करें।</li><li>आधार की सेवा करने वाले सत्यापन करने के लिए बाध्य हैं।</li><li>Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.</li><li>This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mVadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on <a href="http://www.uidai.gov.in">www.uidai.gov.in</a>.</li><li>Aadhaar is unique and secure.</li><li>Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.</li><li>Aadhaar helps you avail of various Government and Non-Government benefits/services.</li><li>Keep your mobile number and email id updated in Aadhaar.</li><li>Download mVadhaar app to avail of Aadhaar services.</li><li>Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.</li><li>Entities seeking Aadhaar are obligated to seek consent.</li></ul>	
<b>भारतीय विशिष्ट पहचान प्राधिकरण</b> Unique Identification Authority of India	
आर्यन मंगल Aryan Mangal जन्म तिथि/DOB: 07/07/2002 लिंग/ GENDER: MALE	
	
<b>XXXX XXXX 8374</b> <b>VID : 9157 6829 9028 7449</b>	
<b>मेरा आधार, मेरी पहचान</b>	

## Personal Information

Full Name	Aryan Mangal
Former Name / Maiden Name	Aryan
Mobile Number	7055065300
Father's Name	Brijesh Mangal
Spouse's Name	N/A
Date of Birth	2002-07-07
Gender	male
Aadhar Card Number	N/A
Pan Card Number	N/A
Nationality	Indian
Marital Status	Single

## Permanent Address

Permanent Address	Ganj-Jagner, Agra
Pin Code	283115
Mobile Number	07055065300
Current State	Uttar Pradesh
Current Landmark	Near Agarwal Dharmshala
Current Address Stay No.	N/A
Nearest Police Station	Jagner

## Current Address

Current Address	chhlera gau, Sector 44
Pin Code	201303
Mobile Number	07055065300
Current State	Uttar Pradesh
Current Landmark	Near Botenical Garden
Current Address Stay No.	N/A
Nearest Police Station	Noidq

## Declaration and Authorization

Name	
Date	

**Attach Signature.**

A handwritten signature in black ink. The signature is stylized, starting with a large, looped 'M' or 'N' shape, followed by the word 'Manga' in a cursive script. A long, horizontal, slightly curved line extends from the bottom of the signature.

## LATEST EMPLOYMENT 1

I am a Fresher and do not have any prior employment experience	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	2022-07-31
To Date:	2024-08-31
Name of the Reporting Manager:	
Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	

## EX EMPLOYMENT 2

I haven't done my EX-EMPLOYMENT-2	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	
To Date:	
Name of the Reporting Manager:	
Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	

## PREVIOUS EMPLOYMENT 3

I haven't done my PREVIOUS EMPLOYMENT 3	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	
To Date:	
Name of the Reporting Manager:	
Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	

## PREVIOUS EMPLOYMENT 4

I haven't done my PREVIOUS EMPLOYMENT 4	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	
To Date:	
Name of the Reporting Manager:	
Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	



## PREVIOUS EMPLOYMENT 5

I haven't done my PREVIOUS EMPLOYMENT 5	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	
To Date:	
Name of the Reporting Manager:	
Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	

## POST GRADUATION

I haven't done my Post Graduation	0
College Name:	Galgotia University
College Location:	Greater Noida
University Name:	Galgotia University
Major / Specialisation	Business Analytics
Course / Qualification:	MBA
Part Time/ Full Time:	full_time
Roll Number / Register Number:	22042010270
From:	2022-07-31
To:	2024-07-31
Marksheet	1
Provisional Certificate / Diploma / Other Certificates	
Degree Certificate	

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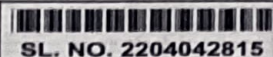
## GRADUATION

I haven't done my Graduation	
College Name:	Sri Kiroli Lal Shashtri Mahavidyalaya
College Location:	Jagner, Agra
University Name:	DBRAU
Major / Specialisation	Science
Course / Qualification:	B.Sc.
Part Time/ Full Time:	full_time
Roll Number / Register Number:	2002620041021
From:	2019-07-31
To:	2022-07-31
Marksheet	1
Provisional Certificate / Diploma / Other Certificates	
Degree Certificate	



**DR. BHIMRAO AMBEDKAR UNIVERSITY, AGRA**  
(FORMERLY-AGRA UNIVERSITY)

**MARKSHEET - 2022**



SL. NO. 2204042815

COURSE NAME : BACHELOR OF SCIENCE (B.Sc.)  
ENROLLMENT NO : A-19072927  
ROLL NO : 2002620041021  
STUDENT'S NAME : ARYAN MANGAL  
FATHER'S NAME : BRIJESH MANGAL  
MOTHER'S NAME : SUMAN MANGAL



ROLL NO : 2002620041021 SESSION : 2019-20 CATEGORY : REGULAR  
COURSE : BACHELOR OF SCIENCE (B.Sc.) PART-I  
COLLEGE NAME : 0262 : SRI KIRORI LAL SHASHTRI MAHAVIDYALAYA, JAGNER, AGRA

NAME OF SUBJECT	Marks Obtained							Marks Obtained Practical Paper			Total Theory & Practical	Result
	Max	Min	I	II	III	IV	Total	Max	Min	Obt.		
SUBJECT-I PHYSICS	150	53	37	37	37		111	50	17	40	151	PASS
SUBJECT-II CHEMISTRY	150	53	37	37	37		111	50	17	40	151	
SUBJECT-III MATHEMATICS	200	70	48	48	52		148				148	
TOTAL OF FIRST YEAR								600 / 210			450	

ROLL NO : 2002620041021 SESSION : 2020-21 CATEGORY : REGULAR  
COURSE : BACHELOR OF SCIENCE (B.Sc.) PART-II  
COLLEGE NAME : 0262 : SRI KIRORI LAL SHASHTRI MAHAVIDYALAYA, JAGNER, AGRA

NAME OF SUBJECT	Marks Obtained							Marks Obtained Practical Paper			Total Theory & Practical	Result
	Max	Min	I	II	III	IV	Total	Max	Min	Obt.		
SUBJECT-I PHYSICS	150	53	34	34	34		102	50	17	40	142	PASS
SUBJECT-II CHEMISTRY	150	53	36	36	36		108	50	17	40	148	
SUBJECT-III MATHEMATICS	200	70	52	52	56		160				160	
TOTAL OF SECOND YEAR								600 / 210			450	

ROLL NO : 2002620041021 SESSION : 2021-22 CATEGORY : REGULAR  
COURSE : BACHELOR OF SCIENCE (B.Sc.) PART-III  
COLLEGE NAME : 0262 : SRI KIRORI LAL SHASHTRI MAHAVIDYALAYA, JAGNER, AGRA

NAME OF SUBJECT	Marks Obtained							Marks Obtained Practical Paper			Total Theory & Practical	Result
	Max	Min	I	II	III	IV	Total	Max	Min	Obt.		
SUBJECT-I PHYSICS	150	53	25	23	13		61	50	17	38	99	PASS
SUBJECT-II CHEMISTRY	150	53	32	19	30		81	50	17	37	118	
SUBJECT-III MATHEMATICS	150	53	38	32	17		87	50	17	40	127	
TOTAL OF THIRD YEAR								600 / 210			344	FIRST DIVISION
TOTAL OF SECOND YEAR								600 / 210			450	
TOTAL OF FIRST YEAR								600 / 210			450	
GRAND TOTAL OF I, II & III YEAR								1800 / 630			1244	
RASTRA GAURAV & ENVIRONMENTAL STUDIES								100 / 35			088	CLEARED

DATE OF PRINTING



03-01-2025

PREPARED BY

CHECKED BY

CONTROLLER OF EXAMINATION

## 12TH STANDARD

I haven't done my 12th Standard	
School Name/College Name:	K M Public School
School Location:	Agra
Board Name/University Name:	CSBE
Major Subjects	PCM
Course / Qualification:	Intermediate
Part Time/ Full Time:	full_time
Roll Number / Register Number:	5610518
From:	2018-04-02
To:	2019-04-01
Marksheet	1

[Click to open the file](#)

## PROFESSIONAL REFERENCE 1

Name of the Person:	
Designation:	
Contact No:	
Email ID:	
Name of the Organisation:	raDIUS

## PROFESSIONAL REFERENCE 2

Name of the Person:	
Designation:	
Contact No:	
Email ID:	
Name of the Organisation:	rADIUS





Employment Deails	
Years of Experience	
No of Employment	0