

**EMPLOYEE BACKGROUND VERIFICATION FORM****COMPANY NAME: Four Seasons Hotel Mumbai (A Division of Provenance Land Pvt Ltd)**

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	
Anushka Shinde			
Father's Name	Date of Birth(dd/mm/yy)	Husband's Name	
Jitendra shinde	26-03-2003		
Gender	Mobile Number	Nationality	Marital Status
Female	8928478576	Indian	Single

Current Address	Period of Stay	Contact details
Full Address	From	Residence Landline Number
9 modi seth compound G D ambekar marg kala chowki ambewadi mumbai 33	March-2003	8928478576
Pin code		
400033	To	Alternate Mobile Number
State	April-2026	
Maharashtra		
Prominent Landmark		
Tank road post office		
Nearest Police Station		
Kala chowki police station		

Permanant Address	Period of Stay	Contact details
Full Address	From	Residence Landline Number
9 modi seth compound G D ambekar marg kala chowki ambewadi mumbai 33	March-2003	8928478576
Pin code		
400033	To	Alternate Mobile Number
State	April-2026	
Maharashtra		
Prominent Landmark		
Tank road post office		
Nearest Police Station		
Kala chowki police station		8850935659

**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> : 2	<b>No. of employments</b> : 1	
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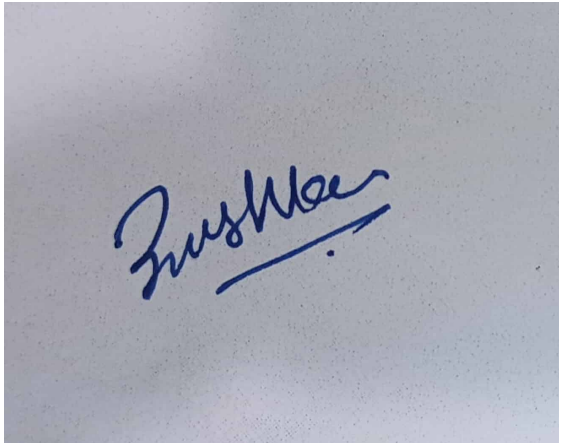
LAST EMPLOYMENT		Job Location	
The Ritz Carlton		Worli	
Telephone No	Employee Code	Designation	Department
	M0094	Concierge Executive	101964923086
Employment Period		Reporting Manager's Name	Reporting Manager's Contact No
From	To	Edwin Saldanha	
01-06-2023	31-03-2026		Reporting Manager's Email ID
Duties & Responsibilities		Reasons for Leaving	
		Better opportunity	
HR Name		HR Contact No	HR Email ID
First Salary Drawn	Was this position Permanent Temporary Contractual	Agency Details(if temporary or contractual), provide details	
Last Salary Drawn			
31000			
<b>Please tick mark the documents for this employment</b>			
Resignation Acceptance		Relieving Letter	Latest 3 months pay slip

EX-EMPLOYMENT-2		Job Location	
Telephone No	Employee Code	Designation	Department
Employment Period		Reporting Manager's Name	Reporting Manager's Contact No
From	To		Reporting Manager's Email ID
Duties & Responsibilities		Reasons for Leaving	
HR Name		HR Contact No	HR Email ID
First Salary Drawn	Was this position Permanent Temporary Contractual	Agency Details(if temporary or contractual), provide details	
Last Salary Drawn			
<b>Please tick mark the documents for this employment</b> Resignation Acceptance      Relieving Letter      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 . .

Anushka Shinde		04-06-2026
<b>Full name of the candidate</b>	<b>Signature</b>	<b>Date of form filled</b>