

EMPLOYEE BACKGROUND VERIFICATION FORM

COMPANY NAME : HML

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 should you join the organization.

Position applied for		Job Location	
Territory Manager		Delhi	
Personal Information			
Full Name of the Applicant		Pancard Number	Aadhaar Number
CHETAN GUPTA		BBYPG0317A	543551986223
Father's Full Name	AJAYKUMAR GUPTA	Date of Birth (DD/MM/YYYY)	
Husband Name		14-04-1991	
Gender (MALE/FEMALE)	MOBILE NUMBER	Nationality	Marital Status
MALE	8377865530	INDIAN	MARRIED
Personal Email ID		Official Email ID	
gupta.chetan.14786@gmail.com		chetan.gu@healthiummedtech.com	
Permanent Address		Period of stay	
Qno: 54 Rehan Colony Jammu Pin 180005		From (Month/Year)	To (Month/Year)
		04/1991	
Pincode		Residence Mobile Number	Alternate Mobile number
180005		8377865530	
State			
JK			
Prominent Landmark			
Sarwal, Chowki			
Nearest Police Station			

Education Qualification - Please attach copy of Degree and Final year mark sheet

Name of the University	POST GRADUATION Diploma	Dates Attended		Qualification Gained	ID / Roll No
		From	To		
		dd/mm/yy	dd/mm/yy	Name of the Course	
JKS BOTE	Engineering in Electronics & Communication	Aug 2011	June 2014	Elec Electronics & Commn Diploma	2304 R11269
Name of the College		Course Name / Specialization			
NITS		Diploma program in Electronics & Communication			

Please tick mark the documents submitted for this qualification along with this form

Marksheets Provisional Certificate Degree Certificate None

Name of the University	GRADUATION	Dates Attended		Qualification Gained	ID / Roll No
		From	To		
		dd/mm/yy	dd/mm/yy	Name of the Course	
Name of the College		Course Name / Specialization			

Please tick mark the documents submitted for this qualification along with this form

Marksheets Provisional Certificate Degree Certificate None

Name of the College	University / Board Name & Location	Dates Attended		Qualification Gained	ID / Roll No
		From	To		
		dd/mm/yy	dd/mm/yy	Name of the Course	
12TH STANDARD	Jharkhand state open school	June 2014	June 2015	Science	12001948

Please tick mark the documents submitted for this qualification along with this form

Marksheets

Name of the College	School / Board Name & Location	Dates Attended		Qualification Gained	ID /Roll No
		From	To		
		dd/mm/yy	dd/mm/yy		
10TH STANDARD	JK BOSE	March 2006	May 2007	Regular Science	150096

Please tick mark the documents submitted for this qualification along with this form

Marksheets

Employment History						
<p>Note: Please ensure that you are descriptive wherever necessary – e.g. If company has closed, do mention it.</p> <p>Employee Code/ ID/ Number is mandatory. If your previous employer did not provide one, please mention and state reasons for the same.</p>						
Name of the Employer -1 (Latest Employment)		Address of Employer				
MERIL		meril corporate office, Mukund Marg, Near Balarkha Stadium, Chola Vapi – 346191				
Telephone No	Employee Code/No	Designation		UAN Number		
	25994	Sr. ACM		101497328533		
Employment Period		Reporting Manager's Name		Reporting Manager's Contact No		
From	To			Raj Kumar Sharma		700 66 37 896
3-09-2024		02-08-2025		Reporting Manager's Email ID		
				raj.kumar.sharma@merilife.com		
Duties & Responsibilities		Reasons for leaving				
Heading JK, Jh and Himachal Pradesh		Growth				
HR-Human Resource Contact Person Name & Contact Number		HR - Human Resource Contact Person Email ID				
First Salary drawn		Was this Position <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual <input type="checkbox"/> Temporary	Agency Details (if temporary or contractual), provide details			
Last Salary drawn						
Last Salary drawn						

Contractual

Please tick mark the documents submitted for this employment

 Service Certificate
 None Relieving letter Offer letter Any Other
(please specify)

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

Name of the Employer -2 (Ex-Employment)

Healthium

Address of Employer

Healthium

Telephone No

Employee Code/No

Designation

UAN Number

701219

Sri Field Manager

101497328533

Employment Period

Reporting Manager's Name

Reporting Manager's Contact No

From

To

13-03-2023

24-08-2014

Ranesh Jain

Reporting Manager's Email ID

Duties & Responsibilities

Reasons for leaving

Headly J&L

Growth

HR-Human Resource Contact Person Name & Contact Number

HR - Human Resource Contact Person Email ID

First Salary drawn

Was this Position

Agency Details (if temporary or contractual), provide details

Last Salary drawn

 Permanent
 Temporary
 Contractual

Please tick mark the documents submitted for this employment

 Service Certificate
 None Relieving letter Offer letter Any Other
(please specify)

Documents Required (Mandatory)

Education:

- Photocopy of degree certificate and final mark sheet of all examinations

Employment

- Photocopy of relieving / experience letter for each employer mentioned in the form

Identity & Address Proof

- Pan Card / Passport Copy/ Driving License / Aadhaar Copy / Bank Passbook / Voter ID

Declaration and 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 .

Chetan Gupta	Signature	13-08-2025
Full Name of the Candidate		Date of Form Filled