

### 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	
<i>Quality Assurance</i>		<i>Peenya</i>	
Personal Information			
Full Name of the Applicant		Pancard Number	Aadhaar Number
<i>Rohan. HN</i>		<i>ERYPR2588P</i>	<i>203953344261</i>
Father's Full Name	<i>Nagaraju. J</i>	Date of Birth (DD/MM/YYYY)	
Husband Name	<i>-</i>	<i>14/11/2001</i>	
Gender (MALE/FEMALE)	MOBILE NUMBER	Nationality	Marital Status
<i>Male</i>	<i>8197103910</i>	<i>India</i>	<i>unmarried</i>
Personal Email ID <i>rohannagaraj_111@gmail.com</i>		Official Email ID	
Permanent Address		Period of stay	
<i>BGS college road, Nagamangala, Mandya, 571432</i>		From (Month/Year)	To (Month/Year)
		<i>2001</i>	<i>2025</i>
Pincode		Residence Mobile Number	Alternate Mobile number
<i>571432</i>			<i>9148243380</i>
State			
<i>Karnataka</i>			
Prominent Landmark			
<i>Nagamangala</i>			
Nearest Police Station			
<i>Nagamangala</i>			

Education Qualification - Please attach copy of Degree and Final year mark sheet				
Name of the University	POST GRADUATION	Dates Attended		ID /Roll No
		From	To	
		dd/mm/yy	dd/mm/yy	
Name of the College		Course Name / Specialization		
<i>Sri. Adichunchanagiri college of Pharmacy</i>		<i>M.Pharm (Pharmaceutics)</i>		
Please tick mark the documents submitted for this qualification along with this form				
<input checked="" type="checkbox"/> Marksheet <input type="checkbox"/> Provisional Certificate <input type="checkbox"/> Degree Certificate <input type="checkbox"/> None				

### Employment History

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.

Name of the Employer -1 (Latest Employment)		Address of Employer	
Telephone No	Employee Code/No	Designation	UAN Number
Employment Period		Reporting Manager's Contact No	
From	To		
		Reporting Manager's Email ID	
Duties & Responsibilities		Reasons for leaving	
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	Agency Details (if temporary or contractual), provide details	
Last Salary drawn			
Last Salary drawn	<input type="checkbox"/> Temporary <input type="checkbox"/> Contractual		

#### Please tick mark the documents submitted for this employment

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

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

Name of the Employer -2 (Ex-Employment)		Address of Employer	
Telephone No	Employee Code/No	Designation	UAN Number
Employment Period		Reporting Manager's Contact No	
From	To		
		Reporting Manager's Email ID	
Duties & Responsibilities		Reasons for leaving	
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	Agency Details (if temporary or contractual), provide details	
Last Salary drawn			

#### Please tick mark the documents submitted for this employment

- Service Certificate       Relieving letter       Offer letter       Any Other  
(please specify)  
 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	

Adichunchanagiri University		2019	2023		19BP1076
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Name of the College	Course Name / Specialization
S8: Adichunchanagiri college of Pharmacy	B. Pharm

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	Lewinors PU college	1152, 6th main Vijaynagar 1st stage Mysore	2017	2019	PCMB 400199

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	Name of the Course	
10TH STANDARD	Advin International high School	Maddur road. Kunigal.	2017		2017074077

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

Marksheets

Documents Required (Mandatory)		
<u>Education:</u> <ul style="list-style-type: none"> <li>• Photocopy of degree certificate and final mark sheet of all examinations</li> </ul>		
<u>Employment</u> <ul style="list-style-type: none"> <li>• Photocopy of relieving / experience letter for each employer mentioned in the form</li> </ul>		
<u>Identity &amp; Address Proof</u> <ul style="list-style-type: none"> <li>• Pan Card / Passport Copy/ Driving License / Aadhaar Copy / Bank Passbook / Voter ID</li> </ul>		
<b>Declaration and Authorization</b>		
<p>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.</p> <p>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 .</p>		
<i>Rohan. HN</i>	<i>Rohit</i>	<i>14/10/2025</i>
Full Name of the Candidate	Signature	Date of Form Filled