

### 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	
Personal Information			
Full Name of the Applicant		Pancard Number	Aadhaar Number
MUTTURAJU T. N		CUYPN0686H	891799639492
Father's Full Name	M. NANJUNDASLU AMY	Date of Birth (DD/MM?YYYY)	
Husband Name		30/04/2003	
Gender (MALE/FEMALE)	MOBILE NUMBER	Nationality	Marital Status
MALE	9380307732	INDIAN	SINGLE
Personal Email ID		Official Email ID	
mutturaijutn249@gmail.com			
Permanent Address		Period of stay	
Thimmanadiguru village, lokasare post, kothathole taluk, Mandya - Huluka mandya district		From (Month/Year)	To (Month/Year)
Residence Mobile Number		Alternate Mobile number	
Pincode	571403	9538028299	
State	KARNATAKA		
Prominent Landmark			
Nearest Police Station	MANDYA		

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

Name of the University	POST GRADUATION	Dates Attended		Qualification Gained	ID /Roll No
		From	To		
		dd/mm/yy	dd/mm/yy		
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 University	GRADUATION	Dates Attended		Qualification Gained	ID /Roll No
		From	To		
		dd/mm/yy	dd/mm/yy	Name of the Course	
vidya vikas Institute Engg technology (VTU)	B.E	13/02/2023	30/05/2025	EEE Degree	4VVM22EE427
Name of the College		Course Name / Specialization			
VVIET		BE (EEE)			
Please tick mark the documents submitted for this qualification along with this form					
<input checked="" type="checkbox"/> Marksheets <input type="checkbox"/> Provisional Certificate <input type="checkbox"/> Degree Certificate <input type="checkbox"/> 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	DTE			Diploma	
Please tick mark the documents submitted for this qualification along with this form					
<input checked="" type="checkbox"/> 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	STATE	2017	2014	SSLC	
Please tick mark the documents submitted for this qualification along with this form					
<input type="checkbox"/> Marksheets					

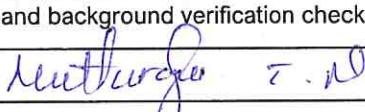
### Employment History

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 Name	
		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			
<input type="checkbox"/> Service Certificate <input type="checkbox"/> Relieving letter <input type="checkbox"/> Offer letter <input type="checkbox"/> Any Other (please specify)			

### 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 Name	
		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			
<input type="checkbox"/> Service Certificate <input type="checkbox"/> Relieving letter <input type="checkbox"/> Offer letter <input type="checkbox"/> Any Other (please specify)			

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>		
Declaration and Authorization		
<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>		
MUTTURAJU T.N		25/08/2025
Full Name of the Candidate	Signature	Date of Form Filled