

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	
FIELD MANAGER		GUWAHATI	
Personal Information			
Full Name of the Applicant		Pancard Number	Aadhaar No.
SATYABRATA GHOSH		BDAPG5087P	743324953834
Father's Full Name	Date of Birth (DD/MM/YYYY)		
PRATAP GHOSH	25-02-1993		
Husband Name			
Gender (MALE/FEMALE)	MOBILE NUMBER	Nationality	Marital Status
MALE	7002880628	INDIAN	MARRIED
Personal Email ID		Official Email ID	
Satyabratahoss23321@gmail.com		Satyabrata.g@healthiummedtech.com	
Permanent Address		Period of stay	
C/o PRATAP GHOSH MISTRY PATTY, LUMDING OPPOSITE RAMTHAKUR MANDIR PO LPS - LUMDING, DIST - NAGANON PIN - 782447		From (Month/Year)	To (Month/Year)
1975		TILL DATE	
Residence Mobile Number		Alternate Mobile Number	
Pincode	782447	9365268113	
State	ASSAM		
Prominent Landmark	HANUMAN TEMPLE		
Nearest Police Station	LUMDING		

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

Name of the University	POST GRADUATION	Dates Attended		Qualification Gained
		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 <input type="checkbox"/> Marksheets <input type="checkbox"/> Provisional Certificate <input type="checkbox"/> Degree Certificate <input type="checkbox"/> None			

Name of the University	GRADUATION	Dates Attended		Qualification Gained
		From	To	Name of the Course
		dd/mm/yy	dd/mm/yy	
K.R.H.S.O.U	B.A	1-09-11	16-11-11	ARTS

Name of the College	Course Name / Specialization		
K.K.H.S.O.U	B.A (ARTS)		

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
		From	To	Gained
		dd/mm/yy	dd/mm/yy	Name of the Course
12TH STANDARD	NIOS - DIMAPUR (NAGALAND)	2008	0-6-10	B.COM
NIOS				

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
		From	To	Gained
		dd/mm/yy	dd/mm/yy	Name of the Course
10TH STANDARD	SEBA - GOWAHATI	2008		HSLC
R.H.S.S				

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

Marksheets

Employment History

Note: Please ensure that you are descriptive wherever necessary – e.g. If company has closed, do mention. 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
7002880628	J21041	PME	
Employment Period		Reporting Manager's Name	
From	To	MANOJ KR. SARMAH	
		872108077	
01/08/2023	31/08/2025	Reporting Manager	
Duties & Responsibilities		Reasons for leaving	
SALES, MARKETING, CME'S			
HR-Human Resource Contact Person Name & Contact Number		HR - Human Resource Contact Person	
BHAAVIN DAVE		9152956122	
First Salary drawn	Was this Position <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual	Agency Details (if temporary or contractual), if any	
Last Salary drawn		JB CHEMICAL'S	
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)

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

Name of the Employer -2 (Ex-Employment)		Address of Employer	
		Dr. FREDDY'S LABORATORIES	
Telephone No	Employee Code/No	Designation	UAN Number
		TM	
Employment Period		Reporting Manager's Name	
From	To	SUSHANT KUMAR DHARA	
		0338409227	
01-03-23	07-31-23	Reporting Manager	
Duties & Responsibilities		Reasons for leaving	
HR-Human Resource Contact Person Name & Contact Number		HR - Human Resource Contact Person	
CHITRA 7730958674			
First Salary drawn	Was this Position		

Last Salary drawn	<input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual	Agency Details (if temporary or contractual), if any
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Please tick mark the documents submitted for this employment

Service Certificate Relieving letter Offer letter
 None

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 required at the company's discretion. I authorize all persons who may have information relevant to this enquiry to disclose the same to GoldQuest Global HR Services Pvt Ltd or its representative. I release all persons from liability on account of this declaration.

I confirm that the above information is correct to the best of my knowledge. I agree that in the event of my selection for employment, my probationary appointment, confirmation as well as continued employment in the services of the company, I am subject to clearance of medical test and background verification check done by the company.

Satyabrata Ghosh	Satyabrata Ghosh	21-08-25
Full Name of the Candidate	Signature	Date of Form I