

POSITION APPLIED FOR: OFFICER,
 FUNCTION : QUALITY ASSURANCE.

HR DEPARTMENT,
 No.3/ 272-5 Neelambur Road,
 Muthugoundenpudur Flyover, Coimbatore

INSTRUCTIONS:

- Fill in the form in your 'Own' handwriting.
- Please do not leave any sections incomplete.

FULL NAME (in Block Letters) :

ADDRESS: PRESENT

3102, Poolakadu,
 Thottam, M.G Pudur (Po)
 Sulur (T.K)
 Cbe - 641 402
 Contact Number (along with
 STD code) : 9578732615

ADDRESS: PERMANENT

321 A, Haawipatti
 Thirupparankundaram
 Madurai - 625005
 E-mail id: Alameluvenkat89@gmail.com
 Contact Number (along with STD
 code) : 9626824987



PERSONAL DATA

MALE FEMALE

DATE OF BIRTH :

05.12.1995

PLACE OF BIRTH :

MADURAI

MARITAL STATUS :

MARRIED

NATIONALITY :

INDIAN

DOMICILE STATE :

TAMIL NADU

PASSPORT DETAILS : NO : _____ DATE OF EXPIRY : _____

PLACE OF ISSUE : _____

DETAILS OF IMMEDIATE FAMILY MEMBERS :

NAME	RELATIONSHIP	AGE (yrs)	OCCUPATION
S. Meena	Mother	47	Home Maker
K. Venkat Raj	Husband	37	Foreman
S. Sudarshan	Brother	24	Supervisor

FAMILY DATA

HEALTH DATA	HEIGHT: <u>165</u> cms.	PHYSICAL DISABILITY (IF ANY): <u>NIL</u>	BLOOD GROUP: <u>O +ve</u>			
	WEIGHT: <u>83</u> kgs.	MAJOR ILLNESS / OPERATION (IF YES, GIVE DETAILS) <u>NIL</u>				
			STATE TIME LOST IN SICKNESS DURING THE LAST 2 YRS <u>NIL</u>			
	FAMILY HISTORY OF MAJOR ILLNESS (IF ANY): <u>NIL</u>					
	START FROM YOUR LAST QUALIFICATION :					
DEGREE	UNIV / INSTITUTE	MONTH & YEAR OF PASSING	CLASS / GRADE			
PROFESSIONAL COURSES / DIPLOMA	UNIV / INSTITUTION	YEAR OF COMPLETION	CLASS / GRADE			
<u>Diploma in EEE.</u>	<u>VICKRAM POLYTECHNIC</u>					
	<u>COLLEGE</u>	<u>2014</u>	<u>1st class</u>			
	<u>MADURA SHAGANGA</u> _{RD}					
ACADEMIC ACHIEVEMENTS (IF ANY)	PROFESSIONAL MEMBERSHIPS					
<u>NIL</u>	<u>NIL</u>					
START FROM RECENT / LAST ASSIGNMENT :						
PREVIOUS EMPLOYMENT	EMPLOYER'S NAME & ADDRESS	TENURE		POSITION & FUNCTION	SALARY P.A.	REASON FOR LEAVING
	<u>LMW - MTD</u>	<u>2018</u>	<u>2021</u>	<u>Junior - Executive (SEM)</u>	<u>12000/-</u>	
	<u>Watertec India Pvt LTD</u>	<u>2015</u>	<u>2018</u>	<u>Officer - QA Inward</u>	<u>9000/-</u>	
	<u>CareNow lifesciences</u>	<u>2022</u>	<u>2025</u>	<u>ASST. Officer QA</u>	<u>19500/-</u>	

TRAINING DATA

DETAILS OF ANY TRAINING / SPECIAL COURSES ATTENDED DURING EMPLOYMENT :

NAME OF COMPANY	DURATION OF TRAINING		NATURE OF TRAINING
	FROM	TO	
CareNow Medical Pvt. Ltd.	20/02/2023	21/02/2023	Internal auditing For QMS . For medical Devices based on ISO 13485/2016 .
Care Now Medical Pvt. Ltd.	09/09/2023	10/09/2023	ANDA Requirement

PRESENT / LAST SALARY :

19751/- .

OTHER DATA

Please attach recent salary slip.

REMUNERATION EXPECTED.

 GROSS SALARY : 19751/-
 CTC : 24650/- .

HAVE YOU APPLIED TO OUR ORGANISATION EARLIER? IF YES, MENTION POST APPLIED, YEAR & RESULT.

NIL .

IF SELECTED TIME REQUIRED TO JOIN

Immediately .

LOCATION PREFERENCE : N/A .

MOTHER TONGUE : Tamil

KNOWLEDGE OF LANGUAGE	READ	WRITE	SPEAK
	English . - -	English . - -	English . Telugu . -

EXTRA-CURRICULAR ACTIVITIES

n/a	n/a	n/a .
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NAME & ADDRESS OF TWO REFERENCES (NOT RELATIVES) :
REFERENCE 1

NAME :

ADDRESS :

REFERENCE 2

NAME :

ADDRESS :

TEL NO :

TEL NO :

RELATIVES / ACQUAINTANCES IN OUR ORGANISATION (IF ANY) :

NAME	RELATIONSHIP	POSITION & LOCATION

HOW DID YOU KNOW ABOUT THIS POSITION / VACANCY?

Apply through Online .

DECLARATION

I declare that the information given above is true to the best of my knowledge & I understand that any false information, misrepresentation or omission of facts called for in this application, or other company records may result in my immediate dismissal without notice even if subsequently employed.

DATE : 01/08/2025

 APPLICANT SIGNATURE : 

PLACE : Coimbatore .



PERSONAL INFORMATION

Full Name:

First

S. ALAMELU MANGAI.

Middle

Permanent Address:

321 A. Harripatti, Thimupparankundaram (Po)

House No

Street Name

Madurai

Tamil Nadu

625005

City

State

ZIP Code

Home Phone:

9606824987

Alternate Phone:

8489845886

Present Address:

3/102, Poolakadu Thottam, M.G Pudur (Po).

House No.

Street Name

Sulus (T.k), Coimbatore

Tamil Nadu

641402

City

State

ZIP Code

Gender (M/F):

Female

Mobile:

9578732615

Email:

Alameluvenkat84@gmail.com

Birth Date:

05/12/1995

Spouse's Name:

k. venkat Ray

Nationality:

Indian

Passport No.:

Expiry date:

Marital Status:

Married

(Single/Married/Divorced/Widowed)

Blood Group:

O⁺

Emergency Contact Information

Full Name:

S. Meena

First

Middle

Last

Address:

8/102, Poolakadu Thottam, M.G. Pudur (P.O)

House No

Street Name

Sulur (T.C), Coimbatore. TamilNadu. 641402

City

State

ZIP Code

Primary Phone:

9626824987

Alternate Phone:

8489845386

Relationship:

Academic Qualification

	Institution	Year(From & To)	Main Subjects	Score %
10 th Std.	Chandler Matric - H.R. SEC. School	2010 - 2011	Science	79.41
Graduation Diploma	Vickram Polytechnic College - Madurai	2011 - 2014	EEE	94.51
Post-Graduation				

Family Background

Relationship	Name	Occupation	Dependent or not
Father	—	—	—
Mother	S. Meena.	Home makes.	dependent
Spouse	k. Venkatai	Foreman (ass)	dependent
Child1			
Child 2			
Others	S. Sudarshanam.	Supervisor (ass)	dependent

Work Experience (Kindly Start with the most recent employer)

Name of the company	Designation	From (Date)	To (Date)	Reporting To	Salary last drawn	Reason for leaving
CareNow Lifesciences Pvt. Ltd.	Asst. Officer - QA	Mar 2023	Jan 2025	V.s Peobabu	19500/-	
LMW - MTD	Junior Executive	Feb 2018	2021	Senthil Kumar	12000/-	
Watertec India Pvt Ltd.	Officer - QA Inward	2015	2018	Rajkumar	9000/-	

Job Information-HML (To be filled by HR Rep)

 Title: Mrs Employee ID: 680054

 Supervisor: _____ Department: QA

 Work Location: Chimbature Email: alamitkurenkatesh@gmail.com

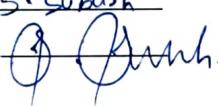
 Joining Date: 01-08-2025 Designation: Officer

 Aadhar No.: 2002 6744 5449 PAN: CSTPA1189H

 Bank Name: KVB Account No.: 1879155000023448

 Branch: Rajyalayam IFSC Code: KVRJ0001879

 Name: S. Subash Date: 01-08-2025

 Signature:  Place: Cbe

Documents		Details		
Date of Joining	01 / 08 / 2025			
Designation	OFFICER - QUALITY ASSURANCE			
Department	QUALITY ASSURANCE			
Personal Details				
Name (in full)	S. ALAMELU MANGAI			
Date Of Birth	05.12.1995			
Email(Personal)	Alameluvenkat84@gmail.com			
Father's Name	A. SETHURAMAN			
Mother's Name	S. MEENA			
Blood Group	O +ve	Marital Status If Married No of children		
Mobile Number	9578732615			
Educational Background				
UG, Graduation, PG & diplomas if any.	Specialization	University & City	Year of completion	
DIPLOMA	ELECTRICAL Q, ELECTRONICS	VICKRAM POLYTECHNIC COLLEGE	2014	
	ENGG.	MADRASI-SIVAGANGAI RD.		
Prior Experience				
Post held	Department / Function	Company (Name)	City	Tenure in years/ months
LMW (Under Contract)	PURCHASE	LMW - MID(Lc)	Coimbatore	3 Years
Ass. OFFICER	QA-Trainee	Waterotec India Pvt	Coimbatore	2.5 Years
CareNow Lifesciences	QA	CareNow Lifesciences	Coimbatore	1 Year 10 months
Address details				
Permanent Address	321A, Haaripatti Thirupparankundaram Madurai - 625005	Present Address	3/102, Poolakader - Thottam, M.G. Rdur(Po) Sulus (T.k) Coimbatore - 641402	
Emergency contact person & number: 9628824987 (MOTHER)				

Copy of Class SSLC / HSC Certificate	<input checked="" type="checkbox"/>
Copy of degree or graduation certificates	<input checked="" type="checkbox"/>
Copies of ACADEMIC & PROFESSIONAL QUALIFICATION(s) Certificates	<input checked="" type="checkbox"/>
Copy of Residence proof (Electricity bill or telephone bill or Ration card or Passport)	<input checked="" type="checkbox"/>
Copy of Identity Proof. (Driving License or Passport or Voter card or PAN card)	<input checked="" type="checkbox"/>
Aadhar Card	<input checked="" type="checkbox"/>
Original copy of last three month Pay Slip received	<input checked="" type="checkbox"/>
Copy of RELIEVING LETTER from previous employer and last 3 organizations (If any)	<input checked="" type="checkbox"/>
Copy of Experience letter from previous employer	<input checked="" type="checkbox"/>
Passport size photograph - 1	<input checked="" type="checkbox"/>

BANK DETAILS

Account Holder Name : Mrs. ALAMELU MAMBI SETHURAMAN

Bank Name : KARUR VYSYA BANK LTD (KVB)

Account type Number : 1879155.000023148

Branch : RASI PNTAYAM

IFSC Code : KVBLO001879

I hereby declare that all the information furnished above is true to the best of my knowledge and belief. I will do all my duties to the best of my ability while following all the code of conduct of the company and maintaining required level of discipline by the company.

Date : 01/08/2025

Place : Coimbatore .

Signature..... 

HR 