

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**

8/102, Poolakadu.  
 Thottam, M.G. Pudur (Po)  
 Sulem (T.K)  
 Cbe - 641 402  
 Contact Number (along with  
 STD code) : 9578732615

**ADDRESS: PERMANENT**

321 A, Haaswipatti  
 Thirupparankundaram.  
 Madurai - 625005  
 E-mail id: Alameluvenkat87@gmail.com  
 Contact Number (along with STD  
 code) : 9626824987



PERSONAL DATA

 NAME & TEL NO. OF PERSON TO CONTACT (in case of emergency) : 9626824987  
 (MOTHER)

☐ 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 :**

FAMILY DATA

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

<b>HEALTH DATA</b>	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)	STATE TIME LOST IN SICKNESS DURING THE LAST 2 YRS				
	<u>NIL</u>	<u>NIL</u>				
	FAMILY HISTORY OF MAJOR ILLNESS (IF ANY): <u>NIL</u>					
<b>EDUCATION</b>	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>1<sup>st</sup> class</u>			
	<u>MADURA SIVAGANGA</u>					
ACADEMIC ACHIEVEMENTS (IF ANY)		PROFESSIONAL MEMBERSHIPS				
<u>NIL</u>		<u>NIL</u>				
<b>PREVIOUS EMPLOYMENT</b>	START FROM RECENT / LAST ASSIGNMENT :					
	EMPLOYER'S NAME & ADDRESS	TENURE		POSITION & FUNCTION	SALARY P.A.	REASON FOR LEAVING
		FROM	TO			
	<u>LMW - MTD</u>	<u>2018</u>	<u>2021</u>	<u>Junior - Executive (sem)</u>	<u>12000/-</u>	
	<u>Nareetee India Pvt LTD</u>	<u>2015</u>	<u>2018</u>	<u>Officer - GA Inward</u>	<u>9000/-</u>	
<u>CareNow Lifesciences</u>	<u>2022</u>	<u>2025</u>	<u>Asst. Officer GA</u>	<u>19500/-</u>		

**Format No: CNL/HR/007-F05/01**

NAME &amp; ADDRESS OF TWO REFERENCES (NOT RELATIVES) :

REFERENCE 1	REFERENCE 2
NAME :	NAME :
ADDRESS :	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 &amp; 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*

 PLACE : *Coimbatore*

 APPLICANT SIGNATURE : *S. Alameh Mangal*



**PERSONAL INFORMATION**

Full Name: S. ALAMELU MANGAI.  
First Middle

Permanent Address: 321 A. Hanvipatti, Thirupparankundaram (Po)  
House No. Street Name

Madurai Tamil Nadu 625005  
City State ZIP Code

Home Phone: 9626824987 Alternate Phone: 8489845386

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: Alameluvenkat89@gmail.com

Birth Date: 05/12/1995

Spouse's Name: K. Venkat Raj

Nationality: Indian

Passport No.: \_\_\_\_\_ Expiry date: \_\_\_\_\_

Marital Status: Married  
(Single/Married/Divorced/Widowed)

Blood Group: O<sup>+</sup>

**Emergency Contact Information**

Full Name:

S. Meena

First

Middle

Last

Address:

8/102, Poolakadu Thottam, M.G. Puram (Po)

House No

Street Name

Sulus (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 <sup>th</sup> Std.	Chandlers Matric - HR. SEC. School	2010 - 2011	Science	79.41
Graduation	Vickram Polytechnic College - Madurai	2011 - 2014	EEE	94.51
Diploma				
Post-Graduation				

**Family Background**

Relationship	Name	Occupation	Dependent or not
Father	-	-	-
Mother	S. Meena	Home makes	dependent
Spouse	K. Venkataraj	Foreman (GSS)	dependent
Child1			
Child 2			
Others	S. Sudarshanam	Supervisor (GSS)	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. Poobalan	19500/-	
LMW - MTD	Junior Executive	Feb 2018	2021	Senthikumar	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: Coimbatore Email: alamukunickat7@gmail.com

 Joining Date: 01-08-2025 Designation: Officer

 Aadhar No.: 2002 6747 5749 PAN: CSTPA1189H

 Bank Name: KvB Account No.: 1879155000023148

 Branch: Raigalavayam IFSC Code: KVB0 0001879


 Name: S. Subash

 Date: 01-08-2025

 Signature: [Signature]

 Place: Chb



Documents	Details
<p><b>Date of Joining</b> : 01 / 08 / 2025</p> <p><b>Designation</b> : OFFICER - QUALITY ASSURANCE</p> <p><b>Department</b> : QUALITY ASSURANCE</p>	

Personal Details			
Name (in full)	S. ALAMELU MANGAI		
Date Of Birth	05.12.1995		
Email(Personal)	Alameluvenkat87@gmail.com		
Father's Name	A. SETHURAMAN		
Mother's Name	S. MEENA		
Blood Group	O <sup>+</sup> ve	Marital Status	MARRIED
Mobile Number	9578732615	If Married No of children	

Educational Background			
UG, Graduation, PG & diplomas if any.	Specialization	University & City	Year of completion
DIPLOMA	ELECTRICAL & ELECTRONICS ENGS.	VICKRAM POLYTECHNIC COLLEGE MADURAI-SIVAGANGAI RD.	2014

Prior Experience				
Post held	Department / Function	Company (Name)	City	Tenure in years/ months
LMW (Under Contract)	PURCHASE	LMW - MID (LCC)	Coimbatore	3 Years
ASS. OFFICER	QA-Inward	Hi-testec India Pvt.	Coimbatore	2.5 Years
CareNow Lifesciences Asst. Officer	QA	CareNow Lifesciences	Coimbatore	1 Year 10 months

Address details	
<b>Permanent Address</b> 321 A, Haarwipatti Thisupparankundaram Madurai - 625005	<b>Present Address</b> 3/102, Poolakadu - Thottam, M.G. Adar (Po) Sulus (T.K) Coimbatore - 641402

<b>Emergency contact person &amp; number:</b> 9626824987 (MOTHER)
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Copy of Class SSLC / HSC Certificate	✓
Copy of degree or graduation certificates	✓
Copies of ACADEMIC & PROFESSIONAL QUALIFICATION(s) Certificates	✓
Copy of Residence proof (Electricity bill or telephone bill or Ration card or Passport)	✓
Copy of Identity Proof. (Driving License or Passport or Voter card or PAN card)	✓
Aadhar Card	✓
Original copy of last three month Pay Slip received	✓
Copy of RELIEVING LETTER from previous employer and last 3 organizations (If any)	✓
Copy of Experience letter from previous employer	✓
Passport size photograph - 1	✓

**BANK DETAILS**

Account Holder Name : ..... Mrs. ALAMELUMANBAI SETHURAMAN .....

Bank Name : ..... KARUR VYSYA BANK LTD (KVB) .....

Account type Number : ..... 1879155 000023148 .....

Branch : ..... RASIPALAYAM .....

IFSC Code : ..... KVB0001879 .....

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: S. Alamelu Manbai

HR : [Signature]

Confidential

For Internal Use Only

CareNow Lifescies Pvt Ltd. 3/272-5-1 Neelambur Road , Muthugoundenpudur, Coimbatore, TN, INDIA – 641402.