

# 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	
REGIONAL MANAGER		CHENNAI	
Personal Information			
Full Name of the Applicant	Pancard Number	Aadhaar Number	
REEJU P	ALJPR2308G	918671900190	
Father's Full Name	Date of Birth (DD/MM/YYYY)		
VELAYUDHAN P	05-04-1979		
Husband Name	Nationality	Marital Status	
	INDIAN	MARRIED	
Gender (MALE/FEMALE)	MOBILE NUMBER	Official Email ID	
MALE	9895765085		
Personal Email ID	teejuvelayudhan@gmail.com		
Permanent Address		Period of stay	
11-C, VEEGALAND KINGSTOWN, AMBILI NAGAR, KOTTAKAKAM, TRIPUNITHURA, ERNAKULAM-682301		From (Month/Year) To (Month/Year)	
		01-07-2020 PRESENT	
Residence Mobile Number		Alternate Mobile number	
9895765085		9567513066	
Pincode	682301		
State	KERALA		
Prominent Landmark	VEEGALAND KINGSTOWN		
Nearest Police Station	TRIPUNITHURA		

## 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 Course	
Name of the College		Course Name / Specialization			

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

☐ Marksheet

☐ Provisional Certificate

☐ Degree Certificate

☐ None

Name of the University	GRADUATION	Dates Attended		Qualification Gained		ID /Roll No
		From dd/mm/yy	To dd/mm/yy	Name of the Course		
CALCUT UNIVERSITY	BSC MATHEMATICS	31-07-1996	31-03-1999	BACHELOR OF SCIENCE, MATHEMATICS PHYSICS AND STATISTICS		31569
Name of the College		Course Name / Specialization				
ST.JOSEPH'S COLLEGE, DEVAGIRI		BACHELOR OF SCIENCE-MAIN MATHEMATICS AND SUB-PHYSICS AND STATISTICS				
Please tick mark the documents submitted for this qualification along with this form						
<input checked="" type="checkbox"/> Marksheet <input checked="" type="checkbox"/> Provisional Certificate <input checked="" type="checkbox"/> Degree Certificate <input type="checkbox"/> None						
Name of the College	University / Board Name & Location	Dates Attended		Qualification Gained		ID /Roll No
		From dd/mm/yy	To dd/mm/yy	Name of the Course		
12TH STANDARD						
GOV. HIGHER SECONDARY SCHOOL EASTHILL, CALCUT	BOARD OF HIGHER SECONDARY EXAMINATION	01-07-1994	28-03-1996	PHYSICS, CHEMISTRY, MATHEMATICS AND BIOLOGY		4711
Please tick mark the documents submitted for this qualification along with this form						
<input checked="" type="checkbox"/> Marksheet						
Name of the College	School / Board Name & Location	Dates Attended		Qualification Gained		ID /Roll No
		From dd/mm/yy	To dd/mm/yy	Name of the Course		
10TH STANDARD						
CMC BOYS HIGH SCHOOL, ELATHUR CALCUT	SECONDARY SCHOOL LEAVING CERTIFICATE-SSLC, GOV. OF KERALA	1988	1994	SSLC-SECONDARY SCHOOL LEAVING CERTIFICATE		122781
Please tick mark the documents submitted for this qualification along with this form						
<input checked="" type="checkbox"/> Marksheet						



**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	
LYCEUM LIFE SCIENCE PVT. LTD		SWATI TRINITY, C-1103 & C-1104, NR APPLEWOOD TOWNSHIP, S.P. RING ROAD, SHELA, AHMEDABAD, GURAT-380057	
Telephone No 2717484130	Employee Code/No LY-0717	Designation SALES MANAGER	UAN Number 10197878369
Employment Period		Reporting Manager's Name MR. SHYAMAL ROY	
From 10-05-2025	To 17-11-2025	Reporting Manager's Contact No 9777089680	
Duties & Responsibilities		Reasons for leaving	
Sales Manager for 3 states, Kerala, Karnataka and Tamil Nadu		Career Growth	
HR-Human Resource Contact Person Name & Contact Number Mr. Hardik Patel- 9327548242		HR - Human Resource Contact Person Email ID hardik@lyceumworld.com	
First Salary drawn 69232	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 98903	<input type="checkbox"/> Temporary <input type="checkbox"/> Contractual		
Last Salary drawn 98903	<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
HEALTH AND GLOW PVT. LTD.	M. RAAKANI, BURUZU MAGU, MALE' 20341, REPUBLIC OF MALDIVES
Telephone No 960-9390003	Employee Code/No MANAGER
Designation BUSINESS DEVELOPMENT MANAGER	UAN Number NA
Employment Period	Reporting Manager's Name MR. NASEEM
From 01-May-24	To 09-May-25
Reporting Manager's Contact No 960-7772213	
Reporting Manager's Email ID naseem@healthandglow.mv	
Duties & Responsibilities	
Reasons for leaving	
BUSINESS DEVELOPMENT MANAGER FOR MALDIVES	
Family Priority, Relocated to India	
HR-Human Resource Contact Person Name & Contact Number MS WAF A-960-9643731	HR - Human Resource Contact Person Email ID hr@healthandglow.mv
First Salary drawn	Was this Position <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual
MVR-38840- (INR-213620)	
Last Salary drawn	Agency Details (if temporary or contractual), provide details
MVR-38840- (INR-213620)	

Please tick mark the documents submitted for this employment



☐ Service Certificate      ☐ Relieving letter      ☐ Offer letter      ☐ Any Other  
☐ None      (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 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.

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.

Full Name of the Candidate	Signature	Date of Form Filled
REEJU PANAMOYIL		29-11-2025