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HEALTHIUM MEDTECH LTD

Photo

Employee Information

Personal Information

Full Name: Vijaya (First) Middle Shetty (Last)

Permanent Address: Vigneshwara Nilaya, Chitteri Tambli (House No. / Street Name)
Siddapura, Udupi Dist. Karnataka - 576229 (City / State / ZIP Code)

Home Phone: 8971611594 Alternate Phone: 7899838178

Present Address: 26/1141 4th cross, Nagashettihalli (House No. / Street Name)
Bangalore North Karnataka 560094 (City / State / ZIP Code)

Gender (M/F): Male

Mobile: 9663867284

Email: vijayas7284@gmail.com

Birth Date: 16-04-1993

Spouse's Name: Vandana

Nationality: Indian

Passport No.: P1821587 Expiry date: 23/05/2026

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

Blood Group: O+ve

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Emergency Contact Information

Full Name: Vandana
First Middle Last

Address: 26/141 4th cross Nagashettihalli
House No. Street Name

Bangalore North Karnataka 560094
City State ZIP Code

Primary Phone: 7899838178 Alternate Phone: 9019912519

Relationship: Wife

Academic Qualification

	Institution	Year(From & To)	Main Subjects	Score %
10th Std.	G.H.P.S Siddapur	2008 - 2009	General	65%
Graduation	Govt. First Grade Shankar Narayan	2011 - 2014	Accounts	55%
Post-Graduation	Government college Tenkanidiyur	2016 - 2018	Commerce	51%

Family Background

Relationship	Name	Occupation	Dependent or not
Father	Shekhara Shetty	Farmer	No
Mother	Bhageerathi	House wife	No
Spouse	Vandana	Teacher	Dependent.
Child1	NA	-	-
Child 2	NA	-	-
Others	NA	-	-

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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
Navi Technology	Associate Manager	12/09/24	9/11/25	Manager	October 2025	Job security
KARAM Safety	Lead A.P Specialist	06/08/19	07/09/24	A.P Controller	August 2024	Carreer Growth

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

Title: _____ Employee ID: _____

Supervisor: _____ Department: _____

Work Location: _____ Email: _____

Joining Date: _____ Designation: _____

Aadhar No.: _____ PAN: _____

Bank Name: _____ Account No.: _____

Branch: _____ IFSC Code: _____

Name: _____ Date: _____

Signature: _____ Place: _____