

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	
Area Sales Representative		Delhi	
Personal Information			
Full Name of the Applicant		Pancard Number	Aadhaar Number
HARJEET TOMAR			
Father's Full Name	ASHOK KUMAR TOMAR	Date of Birth (DD/MM/YYYY)	
Husband Name		01/01/2003	
Gender (MALE/FEMALE)	MOBILE NUMBER	Nationality	Marital Status
MALE	7088600789	Indian	Single
Personal Email ID		Official Email ID	
harjeet01012003@gmail.com			
Permanent Address		Period of stay	
Sarvanpur, Najibabad, Bijnor, U.P, 246763		From (Month/Year)	To (Month/Year)
		Residence Mobile Number	Alternate Mobile number
Pincode	246763		
State	U.P		
Prominent Landmark			
Nearest Police Station	Najibabad		

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					
<input type="checkbox"/> Marksheet <input type="checkbox"/> Provisional Certificate <input type="checkbox"/> Degree Certificate <input type="checkbox"/> None					

Name of the University	GRADUATION	Dates Attended		Qualification Gained	ID /Roll No
		From	To		
		dd/mm/yy	dd/mm/yy	Name of the Course	
Graphic Era University	BTech Completed	06/09/21	04/07/25	BTech (Biotech)	2020043

Name of the College	Course Name / Specialization
Graphic Era Deemed to be University	Btech / Biotechnology

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

- Marksheet
 Provisional Certificate
 Degree Certificate
 None

Name of the College	University / Board Name & Location	Dates Attended		Qualification Gained	ID / Roll No
		From	To		
12TH STANDARD		dd/mm/yy	dd/mm/yy	Name of the Course	
City Public School	CBSE	03/04/2019	06/03/2020	PCB	25640822

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

- Marksheet

Name of the College	School / Board Name & Location	Dates Attended		Qualification Gained	ID / Roll No
		From	To		
10TH STANDARD		dd/mm/yy	dd/mm/yy	Name of the Course	
City Public School	CBSE	06/03/17	20/03/18	PCB All Subjects	5349445

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

- 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	
Telephone No	Employee Code/No	Designation	UAN Number
Employment Period		Reporting Manager's Name	Reporting Manager's Contact No
From	To		Reporting Manager's Email ID
Duties & Responsibilities		Reasons for leaving	
HR-Human Resource Contact Person Name & Contact Number		HR - Human Resource Contact Person Email ID	

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