

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	
TERRITORY MANAGER		BHUBANESWAR, ODISHA	
Personal Information			
Full Name of the Applicant		Pancard Number	Aadhaar Number
SUMANTA KUMAR BARIK		AQDPB00417	9325 6045 0602
Father's Full Name	MANMATH KUMAR BARIK	Date of Birth (DD/MM/YYYY) 27/06/1982	
Husband Name		27/06/1982	
Gender (MALE/FEMALE)	MOBILE NUMBER	Nationality	Marital Status
MALE	9937475276	INDIAN	MARRIED
Personal Email ID		Official Email ID	
Sumantabarik32@gmail.com			
Permanent Address		Period of stay	
AT- Dandi Post- Darada Dist- Balesore		From (Month/Year)	To (Month/Year)
		Residence Mobile Number	Alternate Mobile number
Pincode	756022		
State	ODISHA		
Prominent Landmark	NEAR M.E. SCHOOL		
Nearest Police Station	BASTA		

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	Name of the Course	
		dd/mm/yy	dd/mm/yy		
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	ID /Roll No
		From	To	Gained	
		dd/mm/yy	dd/mm/yy	Name of the Course	
F.M. University	Graduation	2000	2003	BSC	217B 99002
Name of the College		Course Name / Specialization			
Siddheswar College, Amarda Road		Chemistry, Botany & Zoology			

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	ID /Roll No
		From	To	Gained	
		dd/mm/yy	dd/mm/yy	Name of the Course	
12TH STANDARD					
Sahid Memorial College, Monida	C.H.S.E ODISHA	1997	1999	+2 Science	345KA 053

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	ID /Roll No
		From	To	Gained	
		dd/mm/yy	dd/mm/yy	Name of the Course	
10TH STANDARD					
L.N. High School Darada	B.S.E ODISHA	1994	1997	10th	33CA028

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

Marksheet

Employment History			
<p>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.</p>			
Name of the Employer -1 (Latest Employment)		Address of Employer	
Kanam Latex Industries Pvt Ltd		Oppoottil Buildings, K.K. Road, Kottayam Kerala.	
Telephone No	Employee Code/No	Designation	UAN Number
9932475226		Product manager	100753366443
Employment Period		Reporting Manager's Name	Reporting Manager's Contact No
From	To	Mr. Abhaya Biswal	82497 96626
01/05/2025	29/12/2025		Reporting Manager's Email ID
		Odisha@kanamlatex.com	
Duties & Responsibilities		Reasons for leaving	
		Career Growth	
HR-Human Resource Contact Person Name & Contact Number		HR - Human Resource Contact Person Email ID	
Mr. Snikanth Kaimal 9447289231		career@kanamlatex.com	
First Salary drawn	Was this Position	Agency Details (if temporary or contractual), provide details	
40281 = w	<input checked="" type="checkbox"/> Permanent		
Last Salary drawn	<input type="checkbox"/> Temporary <input type="checkbox"/> Contractual		
Last Salary drawn	<input type="checkbox"/> Temporary <input type="checkbox"/> Contractual		
42000 = w			
Please tick mark the documents submitted for this employment			
<input type="checkbox"/> Service Certificate <input type="checkbox"/> Relieving letter <input checked="" type="checkbox"/> Offer letter <input type="checkbox"/> Any Other (please specify)			
<input type="checkbox"/> None			
Employment History - Please attach a copy of your relieving letter/service certificate			
Name of the Employer -2 (Ex-Employment)		Address of Employer	
MEDI TRANSCARE PVT. LTD.		Ahmedabad, Gujarat	
Telephone No	Employee Code/No	Designation	UAN Number
		CSR, BDE	100753366443
Employment Period		Reporting Manager's Name	Reporting Manager's Contact No
From	To	Mr. Sabyasachi Panda	9337001201
16/03/2019	30/11/2025		Reporting Manager's Email ID
		spanide1@its.ini.com	
Duties & Responsibilities		Reasons for leaving	
		Career Growth	
HR-Human Resource Contact Person Name & Contact Number		HR - Human Resource Contact Person Email ID	
Mr. Chintan Kini 7486977297		CSR@meditranscare.com	
First Salary drawn	Was this Position	Agency Details (if temporary or contractual), provide details	
27000 = w	<input type="checkbox"/> Permanent		
Last Salary drawn	<input type="checkbox"/> Temporary <input type="checkbox"/> Contractual		
24000 = w			
Please tick mark the documents submitted for this employment			
<input type="checkbox"/> Service Certificate <input type="checkbox"/> Relieving letter <input type="checkbox"/> Offer letter <input type="checkbox"/> Any Other (please specify)			
<input type="checkbox"/> None			

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 .

Sumanta Kumar Barik

Sumanta

05/01/2026

Full Name of the Candidate

Signature

Date of Form Filled