

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	
ASSOCIATE AREA MANAGER		CHAPRA (BIHAR)	
Personal Information			
Full Name of the Applicant		Pancard Number	Aadhaar Number
ATUL KUMAR			
Father's Full Name	Sri. KAMESHWAR Pd. SINGH		Date of Birth (DD/MM/YYYY)
Husband Name			04/11/1985
Gender (MALE/FEMALE)	MOBILE NUMBER	Nationality	Marital Status
MALE	9540475763	INDIAN	MARRIED
Personal Email ID		Official Email ID	
Atul.kumar133@gmail.com		atul.k@heathiummedtech.com	
Permanent Address		Period of stay	
ATUL KUMAR C/O KAMESHWAR Pd. SINGH BHAGWAN BAZAR THANA ROAD NEAR WATER PUMP, IN FRONT OF HANUMAN MANDIR, CHAPRA (BIHAR)		From (Month/Year)	To (Month/Year)
		11/1988	Till Date
		Residence Mobile Number	Alternate Mobile number
Pincode	841301	7838775583	9931727417
State	BIHAR		
Prominent Landmark	HANUMAN MANDIR		
Nearest Police Station	BHAGWAN BAZAR		

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	
ICFAI UNIVERSITY	MBA	July 2007	18/04/09	MBA (MARKETING)	07PMP18513
Name of the College		Course Name / Specialization			
ICFAI NATIONAL COLLEGE (KOLKATA)		MBA MARKETING			

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	ID /Roll No
		From	To	Gained	
		dd/mm/yy	dd/mm/yy	Name of the Course	
J.P. UNIVERSITY	B.Sc	28/07/03	05/04/07	B.Sc PHYSICS HONS.	411941
Name of the College		Course Name / Specialization			
RAJENDRA COLLEGE (CHAPRA)					
Please tick mark the documents submitted for this qualification along with this form					
<input checked="" type="checkbox"/> Marksheet <input type="checkbox"/> Provisional Certificate <input type="checkbox"/> Degree Certificate <input type="checkbox"/> 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					
DR. P.N SINGH COLLEGE CHAPRA	BIHAR INTERME- DIA TE EDUCATI- ON COUNCIL	06/06/01	29/05/03	I.Sc.	10021
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	ID /Roll No
		From	To	Gained	
		dd/mm/yy	dd/mm/yy	Name of the Course	
10TH STANDARD					
RANA PRATAP HIGH SCHOOL RAMPUR KALA	BIHAR SCHOOL EXA- MINATION BOARD, PATNA	16/04/2000	28/03/01	10th	0612
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	
TlMedical (LUTUS)		505-507, Suncity Business Tower, Golf Course Road, Sector-54, Gurgaon, 122002	
Telephone No	Employee Code/No	Designation	UAN Number
7021840645	BH039	Area Sales Manager	100530127963
Employment Period		Reporting Manager's Name	Reporting Manager's Contact No
From	To	Shayad Sabbao	7800001546
21/08/2024	05/08/2025		Reporting Manager's Email ID
		shabbao.rizvi@tlmedical.murugappa.com	
Duties & Responsibilities		Reasons for leaving	
Sales		Growth	
HR-Human Resource Contact Person Name & Contact Number		HR - Human Resource Contact Person Email ID	
Bhavini Mehta 7021840645		bhavini@tlmedical.murugappa.com	
First Salary drawn	Was this Position	Agency Details (if temporary or contractual), provide details	
01/09/2024	<input checked="" type="checkbox"/> Permanent		
Last Salary drawn	<input type="checkbox"/> Temporary		
30/07/2025	<input type="checkbox"/> Contractual		
Last Salary drawn	<input type="checkbox"/> Temporary		
	<input type="checkbox"/> Contractual		
Please tick mark the documents submitted for this employment			
<input type="checkbox"/> Service Certificate <input checked="" type="checkbox"/> Relieving letter <input 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	
ZUVENTUS LTD.		Mumbai	
Telephone No	Employee Code/No	Designation	UAN Number
02262838000	40012737	ABM	100530127963
Employment Period		Reporting Manager's Name	Reporting Manager's Contact No
From	To	Mukesh K. Singh	9308350501
16/04/2024	20/08/2024		Reporting Manager's Email ID
		mkspatnq79@gmail.com	
Duties & Responsibilities		Reasons for leaving	
Sales & Team Handling		Personal	
HR-Human Resource Contact Person Name & Contact Number		HR - Human Resource Contact Person Email ID	
First Salary drawn	Was this Position	Agency Details (if temporary or contractual), provide details	
03/05/2024	<input checked="" type="checkbox"/> Permanent		
Last Salary drawn	<input type="checkbox"/> Temporary		
03/07/2024	<input type="checkbox"/> Contractual		
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 checked="" 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.

ATUL KUMAR	Atul Kumar	14/08/2025
Full Name of the Candidate	Signature	Date of Form Filled

