

Background Verification Form

Company name: NewAge Fire Protection Industries Private Limited
Purpose of Application: NORMAL BGV(EMPLOYMENT)

Applicant's CV

PREETI DIKE

FRESHER

CONTACT

PHONE
+91 83697 02654

EMAIL
preetidike299@gmail.com

ADDRESS
Sion, Mumbai 400037

ABOUT ME

Believes in innovation & hard work.
Prefer working with group where I
can use my knowledge take up
challenge & learn more

EDUCATION

Mumbai University 2022 – 2025
Bachelor of Commerce (b.com)

Shree gauridatt mittal vidyalaya jr.
college 2019 – 2021
12th HSC

Shree gauridatt mittal vidyalaya jr.
college 2019
10th SSC

SKILLS

- Complete Ms-CIT course from auxilium academy
- Complete advance excel from auxilium academy

LANGUAGES

- Marathi – Fluent
- English – Intermediate
- Hindi – Fluent

PERSONAL INFO

- NATIONALITY := INDIAN
- D.O.B := 12.10.2004
- GENDER := FEMALE
- MARTIAL STATUS := UNMARRIED

HOBBIES

- Dance
- Sports
- Reading

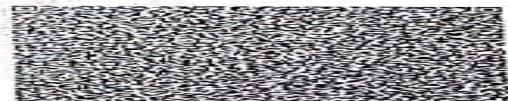
Govt ID #1



भारत सरकार
Government of India

भारतीय लिंगिक वैद्यक विधिकरण
Unique Identification Authority of India
नामकरण क्रम/ Enrolment No.: 0656/31820/01011

To
प्रिति शंतराम दिके
D/O Shantaram Dike,
Room no.76, Punjabi Colony Chawli No.17 Sardar Nagar 4,
Near Antop Hill Church Bus Stop,
Sion, Koliwada,
VTC, Mumbai,
PO: Antop Hill,
District: Mumbai,
State: Maharashtra,
PIN Code: 400037,
Mobile: 8369702657



Signature valid
Signature valid
Signature valid

आपका आधार क्रमांक / Your Aadhaar No. :
4598 8412 6705
V10 : 9197 7377 5016 9975

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



मित्री शंतराम दिके
प्रिति शंतराम दिके, 12/10/2004
महिला/ FEMALE

आधार पहचान का प्रमाण है, जानविकास या जननातिथि का नहीं।
आधार का उपयोग सरकारी प्रक्रियाओं में केवल आधार कोड/ अधिकाराइज़ एवरएमएल की सहायता (आधार कोड/ अधिकाराइज़ एवरएमएल की सहायता) के साथ वित्ती जानकारी चाहिए।
आधार is proof of identity, not of citizenship
Or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML)

4598 8412 6705

मेरा आधार, मेरी पहचान

Personal Information

Full Name	PRITI SHANTARAM DIKE
Former Name / Maiden Name	N/A
Mobile Number	8369702654
Father's Name	SHANTARAM MAHADEV DIKE
Spouse's Name	N/A
Date of Birth	12-10-2004
Age	21 years 1 month
Gender	female
Alternative Mobile Number	9167385169
Aadhar Card Number	459884126705
Aadhar Card Number	N/A
Pan Card Number	JPLPD2461B
Nationality	INDIAN
Marital Status	Single

Permanent Address

House no	ROOM NO. 76 PUNJABI COLONY CHAWL NO. 17 SION KOLIWADA MUMBAI
Street	SARDAR NAGAR 4
District	N/A
City	MUMBAI
State	MH
Pincode	400037

Current Address

House no	ROOM NO. 301, F WING ,BLDG NO.2,
Street	INDIRA NAGAR
District	N/A
City	MUMBAI
State	MH
Pincode	400037

EX EMPLOYMENT 2

If you do not remember, please write 'NA'.	NIL
I haven't done my EX-EMPLOYMENT-2	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	
To Date:	
Name of the Reporting Manager:	
Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	hr@companyname.com
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	
If you do not remember, please write 'NA'.	NIL
I haven't done my EX-EMPLOYMENT-2	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	
To Date:	
Name of the Reporting Manager:	

EX EMPLOYMENT 2

Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	hr@companyname.com
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	

PREVIOUS EMPLOYMENT 3

If you do not remember, please write 'NA'.	NIL
I haven't done my PREVIOUS EMPLOYMENT 3	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	
To Date:	
Name of the Reporting Manager:	
Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	hr@companyname.com
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	
If you do not remember, please write 'NA'.	NIL
I haven't done my PREVIOUS EMPLOYMENT 3	1
Name of the Employer:	
Job Location:	
Employee ID:	
Designation:	
UAN Number:	
From Date:	
To Date:	
Name of the Reporting Manager:	

PREVIOUS EMPLOYMENT 3

Manager's Contact No:	
Manager's Contact Email:	
Reasons for leaving:	
HR Name:	
HR Contact No:	
HR Email ID:	hr@companyname.com
Last Salary Drawn:	
Position Type:	
Agency Details:	
Resignation Acceptance	
Relieving Letter	
Latest 3 months pay slip	

GRADUATION

I haven't done my Graduation	
College Name:	DR.BABA SAHEB AMBEDKAR COLLEGE
College Location:	WADALA
University Name:	MUMBAI
Major / Specialisation	FOCUSED LEARNNG
Course / Qualification:	COMMERCE
Part Time/ Full Time:	full_time
Roll Number / Register Number:	482
From:	09-06-2024
To:	18-03-2025
Marksheet	1
Provisional Certificate / Diploma / Other Certificates	
Degree Certificate	
I haven't done my Graduation	
College Name:	DR.BABA SAHEB AMBEDKAR COLLEGE
College Location:	WADALA
University Name:	MUMBAI
Major / Specialisation	FOCUSED LEARNNG
Course / Qualification:	COMMERCE
Part Time/ Full Time:	full_time
Roll Number / Register Number:	482
From:	09-06-2024
To:	18-03-2025
Marksheet	1
Provisional Certificate / Diploma / Other Certificates	
Degree Certificate	

PROFESSIONAL REFERENCE 1

Name of the Person:	
Designation:	
Contact No:	
Email ID:	
Name of the Organisation:	NEWAGE FIRE PROTECTION INDUSTRIES PVT LTD.
Reference Can Be Taken From (Relatives – strictly no):	colleague
Name of the Person:	
Designation:	
Contact No:	
Email ID:	
Name of the Organisation:	NEWAGE FIRE PROTECTION INDUSTRIES PVT LTD.
Reference Can Be Taken From (Relatives – strictly no):	colleague

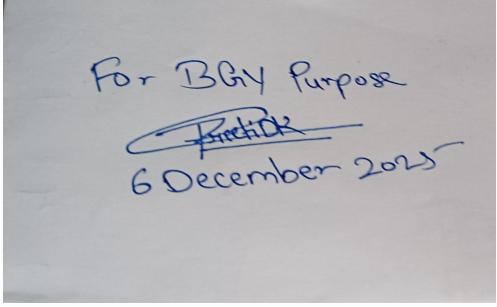
PROFESSIONAL REFERENCE 2

Name of the Person:	
Designation:	
Contact No:	
Email ID:	
Name of the Organisation:	NEWAGE FIRE PROTECTION INDUSTRIES PVT LTD.
Name of the Person:	
Designation:	
Contact No:	
Email ID:	
Name of the Organisation:	NEWAGE FIRE PROTECTION INDUSTRIES PVT LTD.

Declaration & 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.

Preeti Dike	 For BGY Purpose Preeti Dike 6 December 2025	06-12-2025
Full name of the candidate	Signature	Date of form filled

Documents (Mandatory)

Education	Employment	Government ID / Address Proof
Photocopy of degree certificate and final mark sheet of all examinations.	Photocopy of relieving / experience letter for each employer mentioned in the form.	Aadhaar Card / Bank Passbook / Passport Copy / Driving License / Voter ID.

NOTE: If you experience any issues or difficulties with submitting the form, please take screenshots of all pages, including attachments and error messages, and email them to onboarding@goldquestglobal.in. Additionally, you can reach out to us at onboarding@goldquestglobal.in.