



ARUBAITO

ARUBAITO INDIA PRIVATE LIMITED

H-94, First Floor, Sector - 63, NOIDA - 201 301, Uttar Pradesh, INDIA

APPLICATION FORM

PLEASE READ THESE INSTRUCTIONS CAREFULLY

1. Do not leave any item blank. If it is not applicable to you, indicate "N.A."
2. Please attach a scanned copy of your passport showing all relevant details.
3. False particulars or willful suppression of material facts will render you liable to disqualification, or, if appointed, to termination and/or appropriate legal proceedings.

Position Applied For :

Name : Miss JAYA DUBEY
Title First Middle Family / Surname

Present Postal Address

Teachers Colony, Bisunpur
Dhanbad, Jharkhand

Permanent Postal Address

Teachers Colony, Bisunpur
Dhanbad, Jharkhand

Residence Tel. :

Office Tel. :

Mobile Tel. : 7717737811

Fax :

Email Address : dubeyj477@gmail.com

Residence Tel. :

Office Tel. :

Mobile Tel. : 7717737811

Fax :

Email Address : dubeyj477@gmail.com

Personal Details

Date of Birth	2	6	0	1	9	6	Place of Birth	City	DHANBAD
	D	D	M	M	Y	Y		Country	INDIA
Nationality at Birth		INDIAN							
Nationality at Present		INDIAN							
Do you hold Dual Nationality?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
If Yes, please specify									
Marital Status	<input checked="" type="checkbox"/> Single	<input type="checkbox"/> Married							
Gender	<input type="checkbox"/> Male	<input checked="" type="checkbox"/> Female							
Height		164.5							
[In Cms.]									
Weight		48							
[In Kgs.]									
Divorced		<input type="checkbox"/> Separated	<input type="checkbox"/> Widowed						
Religion		HINDU							

Passport Number	Place of Issue	Date of Issue	Date of Expiry
S8346853	Dhanbad	10-01-2019	09-01-2029

Have you ever been convicted of a criminal offence?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Have you ever required medical treatment or counseling for drug or alcohol abuse?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If Yes, please give details	NA		

Have you any pre-existing medical condition / illness?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Do you suffer from any physical defect or partial disability?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If Yes, please give details	NA		

Do you have any relatives employed by Arubaito or any of its subsidiaries?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If Yes, please give details	Name	NA	
	Relationship	First	Middle
		Family / Surname	
	Designation		

Emergency contact details	Name	NA		
		First	Middle	Family / Surname
Address		Relationship		
		Residence Tel.		
		Mobile Tel.		

Do you wear	a) Glasses ?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	b) Contact Lenses?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
If yes, please give details		Long sighted / Short sighted / other : NA			
Do you suffer from colour blindness ?		<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

Do you smoke ?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
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Have you ever worked irregular hours?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are you prepared to do shift work?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

Do you hold a valid driving license ?					<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
If yes, please give details		Issued in	NA	Valid until				

Education & Qualifications

	Qualifications Achieved	Dates			
		From		To	
		MM	YY	MM	YY
School / College (Highest Qualification)	Intermediate	04	12	04	14
University / Other	B-Tech	06	14	06	18
Business / Professional	Layout Design Engineer	04	18	1	18
Other					

Please indicate competency in languages [B = basic I = intermediate F = fluent]							
Language	Read	Write	Speak	Language	Read	Write	Speak
Hindi (F)	✓	✓	✓				
English (F)	✓	✓	✓				

Employment History (Start with your current / last employer.)

Name and City of Employer	Dates				Position held	Gross Annual Salary Package
	From		To			
	MM	YY	MM	YY		
ARF Design Pvt. Ltd. Ranchi, Jharkhand	04	18	11	18	LAYOUT Design Engineer	12 Lpa
Reason for leaving last position : For better career growth opportunities						
Notice Period from current position :						
Expected Gross Annual Salary Package : 3.6 Lpa						

Details of most recent compensation

	Per Month
Basic Salary	
HRA	
Conveyance Allowance	
Special Allowance	
Other Allowances	
Total - A	
	Per Annum
Leave Travel Allowance	
Medicals	
Bonus	
Performance Related Pay	
Provident Fund	
Superannuation	
Others	
Total - B	
	Perquisites
Car	
House	
Others	
Gross Pay Per Annum / CTC	

Please give at least 2 business and 1 personal references (NOT family members/ Relatives)

1	Name	Abhishek Pandey		
	Address	Kathmandu , Nepal		
	Position or Title	RP Manager at China Com Service (CCS)		
	Telephone	977 98 13913791	Fax	
	Email Address	abhishek.pandey0511@gmail.com		
2	Name	Susant Mahanay		
	Address	Jamshodpur, Jharkhand		
	Position or Title	Professor RVSCET		
	Telephone	90 31941747	Fax	
	Email Address	sushant.0014@gmail.com		
3	Name			
	Address			
	Position or Title			
	Telephone		Fax	
	Email Address			

Family Details

No.	Name	Relationship	Date of Birth			Passport Number
			DD	MM	YY	
Spouse						
1	NA					
Parents						
1	Mithlesh Kumar Dubey	Father	25	01	67	NA
2	Binda Dubey	Mother	05	01	72	NA
Parents in Law						
1	NA					
2						
Brothers / Sisters						
1	Anubhav Kumar	Brother	09	03	99	NA
2						
3						
4						

No.	Name	Custody (Yes / No)	Relationship	Date of Birth			Passport Number
				DD	MM	YY	
Children							
1	NA						
2							
3							
4							

Are you a member of any Professional Association / Club / Society ?

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Yes

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No

If Yes, please give details

NA

Please list any interest in sports and/or other hobbies ?

Badminton , Kabaddi , Table tennis , Listen to music

Briefly state why you wish to join Arubaito India Private Limited or any of its subsidiaries?

I want to join Arubaito India Private Limited for better career growth of me and the Company by gaining and applying my knowledge to fulfill organizational goal

Declaration

I hereby declare that the information given is correct to the best of my knowledge and belief, and that I have not withheld any information which might reasonably be calculated to adversely affect my suitability for employment.

I authorize to verify my medical records and obtain references as necessary on the understanding that Arubaito will not contact my current employer until I am offered employment or I have given specific authority in writing to obtain such references.

Dated : 24-01-2020

Signed :

Jaya Dubey