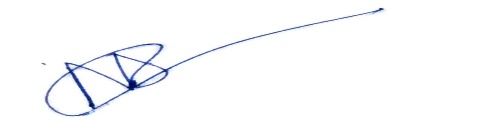
|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name (as per Aadhar Card) | AYUSH SRIVASTAVA | | | | | | | | |
| Date of joining (dd/mm/yyyy) | 04/09/2023 | | | Gender | MALE | | | Age | 24 |
| Blood Group | Date of birth (dd/mm/yy) | | | Telephone 1 contact no(s). 2 | | +91 8957840326  +91 8264820651 | | | |
| AB+ | 25/07/1999 | | |
| Current Address with PIN code *(Please print complete postal address)* | HOUSE NO. 322, KRISHNA NAGAR COLONY, NEAR SHIV MANDIR, BASHARATPUR, GORAKHPUR, UTTAR PRADESH-273004. | | | | | | | | |
| Personal email id | 19bcs1950@gmail.com | | | | | | | | |
| Permanent Address with PIN code *(Please print complete postal address)* | HOUSE NO. 322, KRISHNA NAGAR COLONY, NEAR SHIV MANDIR, BASHARATPUR, GORAKHPUR, UTTAR PRADESH-273004. | | | | | | | | |
| Names and details of two emergency contacts: | Name  Contact No  Relationship | ANIL KUMAR SRIVASTAVA  +91 9450553185  FATHER | | | | | | | |
| Name  Contact No  Relationship | POONAM SRIVASTAVA  +91 9696199379  MOTHER | | | | | | | |
| Marital status | ☑ Unmarried □ Married □ Widow □ Widower | | | | | | | | |
| Designation [As per offer letter] | IT TRAINEE | | | | | | | | |
| Passport Number \* | T4267056 | | Passport issuing Country | | | | INDIA | | |
| PAN \* | JNQPS9681R | | Aadhar Number \* | | | | 6671-8841-0955 | | |

Are you related to anyone in FIS in any manner? (Example - employee’s spouse, domestic partner, brother, sister, parent, child, stepchild, father-in-law, mother-in-law, sister-in-law, brother-in-law, daughter-in-law, son-in- law, aunt, uncle, cousin and any other member of the employee’s household). YES / NO ✓

Name of the Employee: Relationship :

I hereby declare that all entries mentioned above are true and complete, and I agree and understand that any falsification of the information herein may cause non-qualification or forfeiture or dismissal of employment. I understand that all information on this report is subject to verification.



|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | | |
| Place | GORAKHPUR | Date | 26/08/2023 |

\* Please submit a Clear copy of these documents along with the joining form.