

**APPLICATION FORM**

***Please fill in the details with utmost attention, as these shall be verified by Client Name and/ or by its representatives.***

***All details are compulsory.***



Please Affix Your

Passport Size

Photograph

PERSONAL DETAILS

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Applicant: Chekkera Chaitanya Reddy | Surname : | | Middle | | First |
|  |  |  |  |  |  |
| Date of Birth (dd/mm/yy): |  | 17/07/1993 |  | Place of Birth: Lakkavaram |  |
|  |  |  |  |  |  |
| Sex: Male |  |  |  | Nationality: Indian |  |
|  |  |  |  |  |  |
| Father’s Name: |  | Venakata Reddy |  | Passport No.: |  |
|  |  |  |  |  |  |
| Home Phone: |  | Office Phone: |  | Mobile:9505017500 |  |
|  |  |  |  |  |  |

RESIDENTIAL ADDRESSES

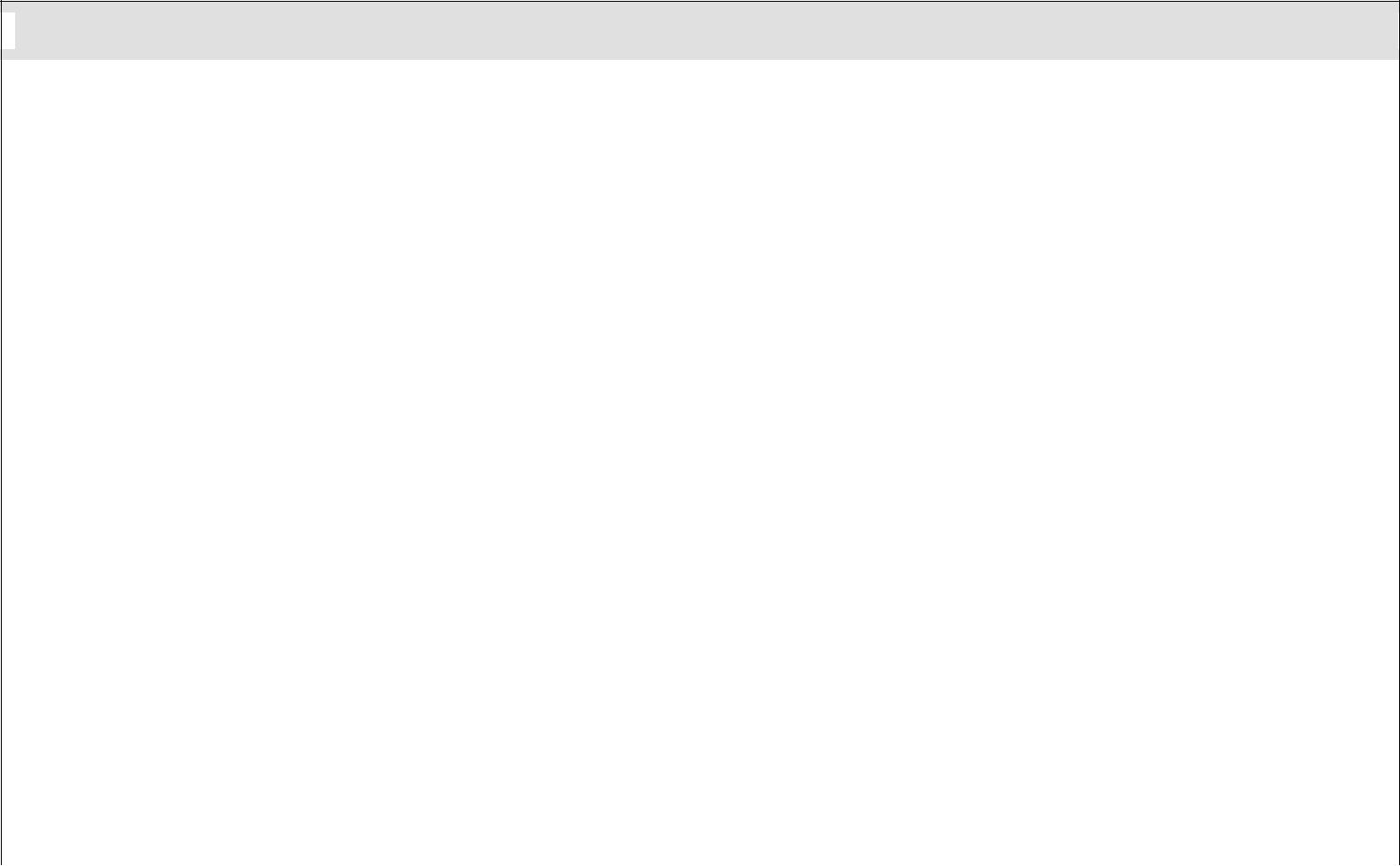
PERMANENT ADDRESS:

|  |  |
| --- | --- |
|  | H.No:10-172, |
|  | Venkatapuram(v), Krishnam Setty palli(post), |
|  | Giddaluru (M), Prakasam (Dist) |
|  | Andhra Pradesh-523357 |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| City: |  |  | State: |  |  | AndhraPradesh |  |
|  |  |  |  |  |  |  |  |
| Pin: 523357 |  |  | Phone No.: 9505017500 |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Duration of Stay:** | **From** (mm/yy) | **To** (mm/yy) | Nature of location: |  | Own |  |  |
|  |  |  |  |
|  | |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |
| CURRENT ADDRESS:  Flat No:103,  AN Venkatadri Heights,  Kousalya Colony,  Near Surya Global School,  Bachupally,  Telangana- 500090 | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| City: Hyderabad |  |  | State: Telangana |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Pin: 500090 |  |  | Phone No.: |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Duration of Stay:** | **From** (mm/yy) | **To** (mm/yy) | Nature of location: | Rented |  |  |  |
|  | 04/21 to Tilldate |  |  |
|  |  |  |  |  |  |  |  |



*All fields are mandatory* *Strictly Private & Confidential*



EDUCATION DETAILS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **DATES** | | | |  |  | **ROLL** |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | **NAME &** |  |  | **NAME & ADDRESS OF** |  |  |  |  |  |  |  |  | **ATTENDED** | | | |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | **COURSE** |  |  | **MARKS (%)** |  |  |  |  | **NUMBER/** |  |  |
|  |  |  |  | **ADDRESS OF** |  |  | **BOARD / UNIVERSITY** |  |  |  |  |  | **CGPA** |  |  | **YEAR** |  |  |  |  |  | **REGISTRATION** |  |  |
|  |  |  |  |  |  |  |  |  |  | **ATTENDED** |  |  |  |  |  |  |  |  |  |  |  |
|  | **QUALIFICATION** |  |  | **SCHOOL /** |  |  | **TO WHICH THE SCHOOL /** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | **&** |  |  | **OF** |  |  | **YEAR** |  |  | **NUMBER/** |  |  |
|  |  |  |  |  |  |  | *(MORNING/ EVENING/* |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | **COLLEGE/** |  |  | **COLLEGE / INSTITUTE** |  |  |  |  |  |  | **ENROL** |  |  | **PASSED** |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | *CORRESPONDENCE)* |  |  | **CLASS** |  |  |  |  |  |  | **EXAM SEAT** |  |  |
|  |  |  |  | **INSTITUTE** |  |  | **IS AFFILIATED TO** |  |  |  |  |  |  |  |  | **MENT** |  |  | **(**MM/YY) |  |  | **NUMBER** |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | (MM/YY) |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **GRADUATION** |  |  | Sri Satyanarayana Engineering College. |  |  | JNTU - Kakinada |  |  | E.E.E |  |  | 67.5 |  |  | 10/10 |  |  | 04/14 |  |  | 10X91A0213 |  |  |
|  | **DEGREE:** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **DISCIPLINE:** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **POST** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **GRADUATION** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **DEGREE:** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **DISCIPLINE:** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **ANY OTHER** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

REASONS FOR BREAKS IN EDUCATION**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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*All fields are mandatory* *Strictly Private & Confidential*



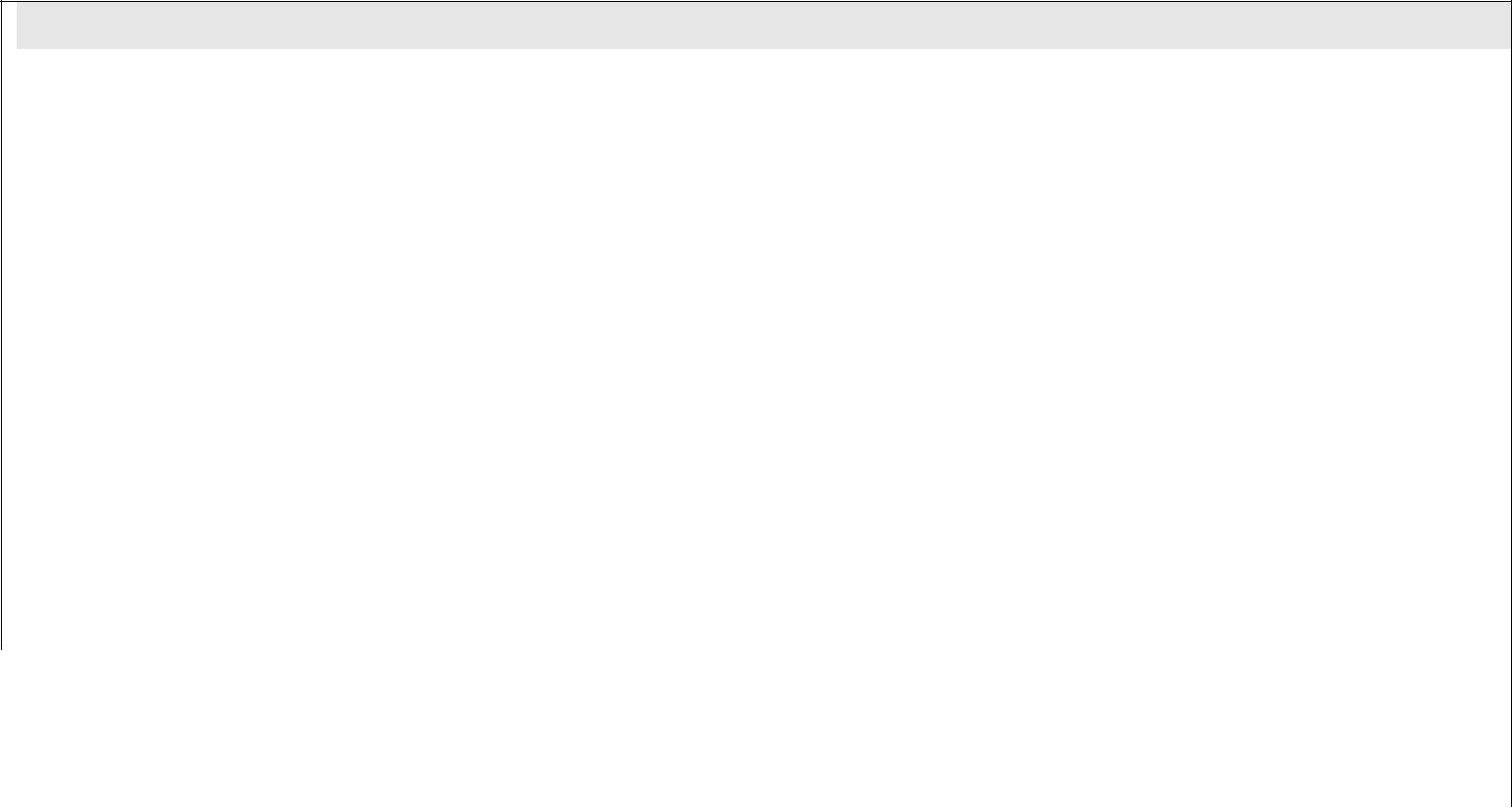
EMPLOYMENT RECORD: Starting with your present or most recent employer, please list last 3 employments. **When listing consulting or**

**temporary assignments, under “Employer”, state the name of the consulting or temporary agency that placed you at the client site. Complete and accurate dates (month/year) must be provided.**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CURRENT EMPLOYER: Vitreos health India Pvt Ltd (An HMS Company)** | |  | **Employee Id:** | | From (mm/yy): | |  | To (mm/yy): |  |
|  |  |  | E009046 |  | 05/17 |  |  | 05/21 |  |
| Street Address: Telecom Nagar Extension, |  |  |  |  | Employer’s | |  | Fax No.: |  |
|  |  |  |  |  | Phone No.: | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| City:Hyderabad | State:Telangana |  | Country:India | |  | Postal Code: | | |  |
|  |  |  |  |  |  |  |  | 500032 |  |
| Job Title:Database developer |  |  | Reason for Leaving: | |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |
| **Employment Status:** *(Please check the relevant box)* | |  | **Supervisor’s** | **Details:** |  |  |  |  |  |
| Full Time |  |  | **Name:** | | Narsimha Reddy Majjiga |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  | **Title:** | |  |  |  |  |  |
|  | |  | Technical Project manager |  |  |  |  |
|  |  |  | **Phone No.:** | | 7569988974 |  |  |  |  |
| ***Outsourcing Agency Details:*** | |  |  |  |  |  |  |  |  |
|  | **E-mail id:** | | [Narsimha.majjiga@hms.com](mailto:Narsimha.majjiga@hms.com) |  |  |  |  |
| Name: |  |  |  |  |  |  |  |
|  |  | *(Preferably official)* | |  |  |  |  |  |
| Address: |  |  |  |  |  |  |  |
|  |  | **HR Manager’s Details:** | | | |  |  |  |
|  |  |  |  |  |  |
| Tel No.: |  |  | **Name:** | | Nisha Kamanwar |  |  |  |  |
|  |  |  |  | |  |  |  |  |  |
| **Description of Duties:** |  |  | **Phone No.:** | |  |  |  |  |  |
|  |  |  |  | |  |  |  |  |  |
|  |  |  | **E-mail id:** | | [Nisha.Kamanwar@hms.com](mailto:Nisha.Kamanwar@hms.com) |  |  |  |  |
|  |  |  | *(Preferably official)* | |  |  |  |  |  |
|  |  |  |  | |  | |  |  |  |
| **EMPLOYER 1:** |  |  | **Employee Id:** | | From (mm/yy): | |  | To (mm/yy): |  |
|  |  |  |  |  |  | |  |  |  |
| Street Address: |  |  |  |  | Employer’s | |  | Fax No.: |  |
|  |  |  |  |  | Phone No.: | |  |  |  |
|  |  |  |  | |  |  | |  |  |
| City: | State: |  | Country: | |  | Postal Code: | | |  |
|  |  |  |  | |  |  |  |  |  |
| Job Title: |  |  | Reason for Leaving: | |  |  |  |  |  |
|  | |  |  | |  |  |  |  |  |
| **Employment Status:** *(Please check the relevant box)* | |  | **Supervisor’s** | **Details:** |  |  |  |  |  |
| Full Time |  |  | **Name:** | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  | **Title:** | |  |  |  |  |  |
| Contract /Through Outsourcing Agency | |  |  |  |  |  |  |
|  |  |  | **Phone No.:** | |  |  |  |  |  |
| ***Outsourcing Agency Details:*** | |  |  |  |  |  |  |  |  |
|  | **E-mail id:** | |  |  |  |  |  |
| Name: |  |  |  |  |  |  |  |
|  |  | *(Preferably official)* | |  |  |  |  |  |
| Address: |  |  |  |  |  |  |  |
|  |  | **HR Manager’s Details:** | | | |  |  |  |
|  |  |  |  |  |  |
| Tel No.: |  |  | **Name:** | |  |  |  |  |  |
|  |  |  |  | |  |  |  |  |  |
| **Description of Duties:** |  |  | **Phone No.:** | |  |  |  |  |  |
|  |  |  |  | |  |  |  |  |  |
|  |  |  | **E-mail id:** | |  |  |  |  |  |
|  |  |  | *(Preferably official)* | |  |  |  |  |  |



*All fields are mandatory* *Strictly Private & Confidential*



EMPLOYMENT RECORD CONTINUED:

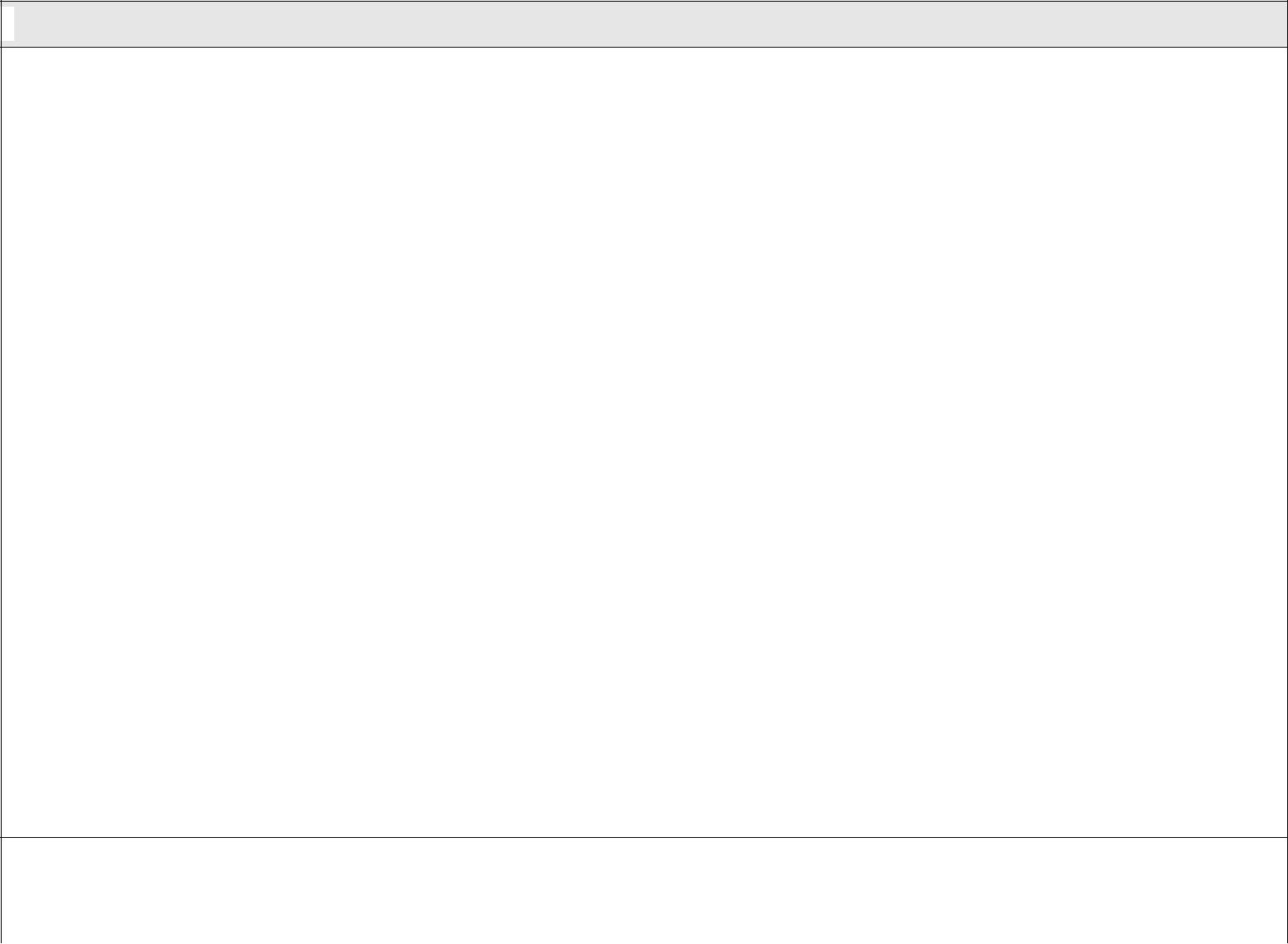
|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EMPLOYER 2:** |  |  | **Employee Id:** | | From (mm/yy): | |  | To (mm/yy): |  |
|  |  |  |  |  |  |  |  |  |  |
| Street Address: |  |  |  |  | Employer’s | |  | Fax No.: |  |
|  |  |  |  |  | Phone No.: | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| City: | State: |  | Country: | |  | Postal Code: | | |  |
|  |  |  |  |  |  |  |  |  |  |
| Job Title: |  |  | Reason for Leaving: | |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |
| **Employment Status:** *(Please check the relevant box)* | |  | **Supervisor’s** | **Details:** |  |  |  |  |  |
| Full Time |  |  | **Name:** | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  | **Title:** | |  |  |  |  |  |
| Contract /Through Outsourcing Agency | |  |  |  |  |  |  |
|  |  |  | **Phone No.:** | |  |  |  |  |  |
| ***Outsourcing Agency Details:*** | |  |  |  |  |  |  |  |  |
|  | **E-mail id:** | |  |  |  |  |  |
| Name: |  |  |  |  |  |  |  |
|  |  | *(Preferably official)* | |  |  |  |  |  |
| Address: |  |  |  |  |  |  |  |
|  |  | **HR Manager’s Details:** | | | |  |  |  |
|  |  |  |  |  |  |
| Tel No.: |  |  | **Name:** | |  |  |  |  |  |
|  |  |  |  | |  |  |  |  |  |
| **Description of Duties:** |  |  | **Phone No.:** | |  |  |  |  |  |
|  |  |  |  | |  |  |  |  |  |
|  |  |  | **E-mail id:** | |  |  |  |  |  |
|  |  |  | *(Preferably official)* | |  |  |  |  |  |



REASONS FOR BREAKS IN EMPLOYMENT HISTORY: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | PROFESSIONAL REFERENCES: | |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  | **PARTICULARS** | **REFERENCE 1** | **REFERENCE 2** | **REFERENCE 3** |  |
|  |  |  |  |  |  |  |
|  |  | **NAME** |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  | **Organization** |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  | **Designation/Position** |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  | **Landline No.** |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  | **Mobile No.** |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  | **Email Address** |  |  |  |  |
|  |  | |  |  |  |  |
| *All fields are mandatory* | | |  |  | *Strictly Private & Confidential* |  |



INFORMATION RELEASE AUTHORIZATION

I certify that the statements made in this application are valid and complete to the best of my knowledge. I understand that false or misleading information may disqualify me from employment and /or result in termination of employment.

I understand that **COTIVITI INDIA PRIVATE LIMITED** may request a verification of information provided by me and /or background check from an agency hired by **COTIVITI INDIA PRIVATE LIMITED** for this purpose.

I further understand that the results of verification and checks and any records made out of that information will be used fo r employment purposes only and will not be given to unauthorized persons.

I authorize **COTIVITI INDIA PRIVATE LIMITED** and/or its agents **Pinkerton Corporate Risk Management** to conduct a verification and background check including but not limited to the verification and check of information and refere nces stated by me in this application for the consideration of **COTIVITI INDIA PRIVATE LIMITED** to be used only for my employment purposes.

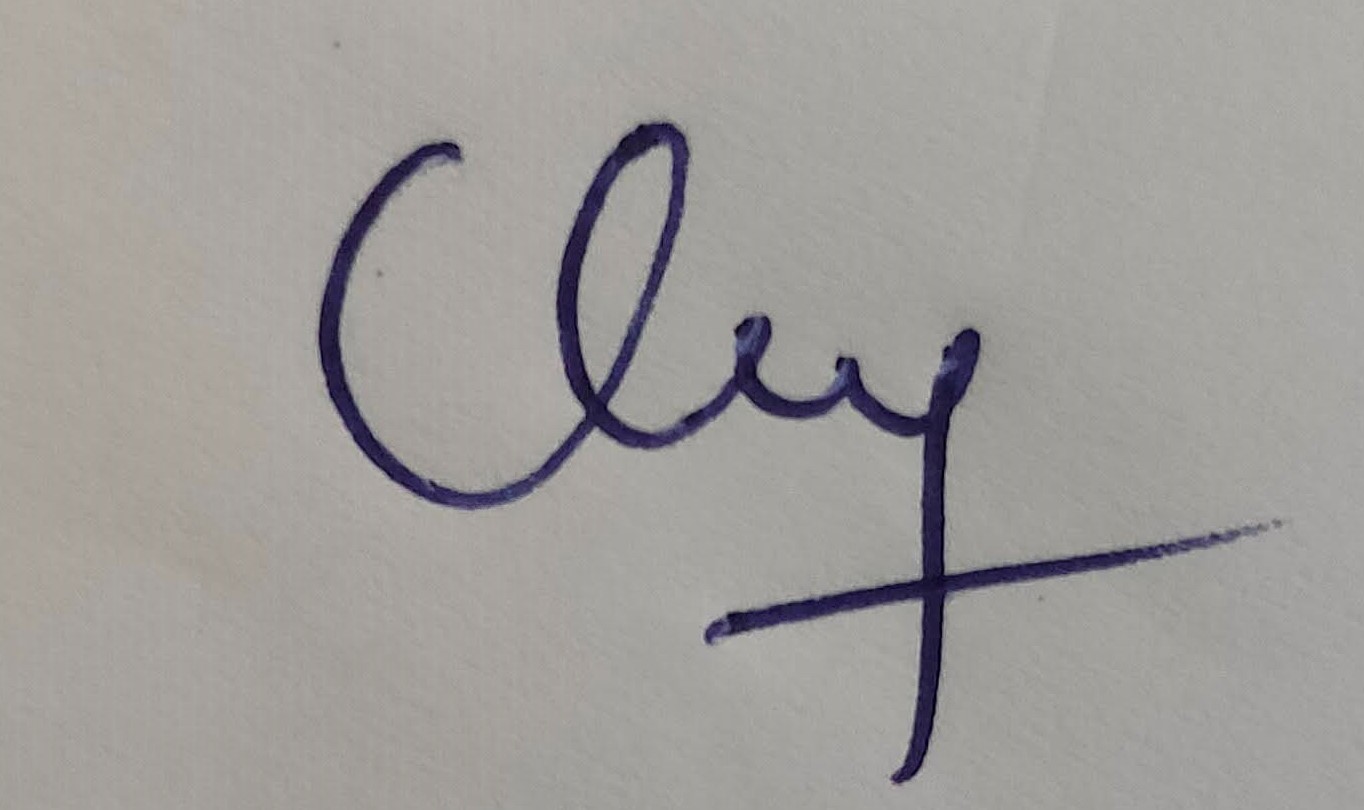
I also authorize all the concerned persons, authorities, organizations, their employees, agents or authorized representatives , whether named in the application or not, to release the information in their knowledge / possession / records relevant to my employment.

In the event that **COTIVITI INDIA PRIVATE LIMITED** and /or its agents are unable to verify any information and references stated in this application, it is my responsibility to furnish the necessary documentation in support of that information.

I fully understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time and my employment decision will always be at the sole discretion of **COTIVITI INDIA PRIVATE LIMITED.**

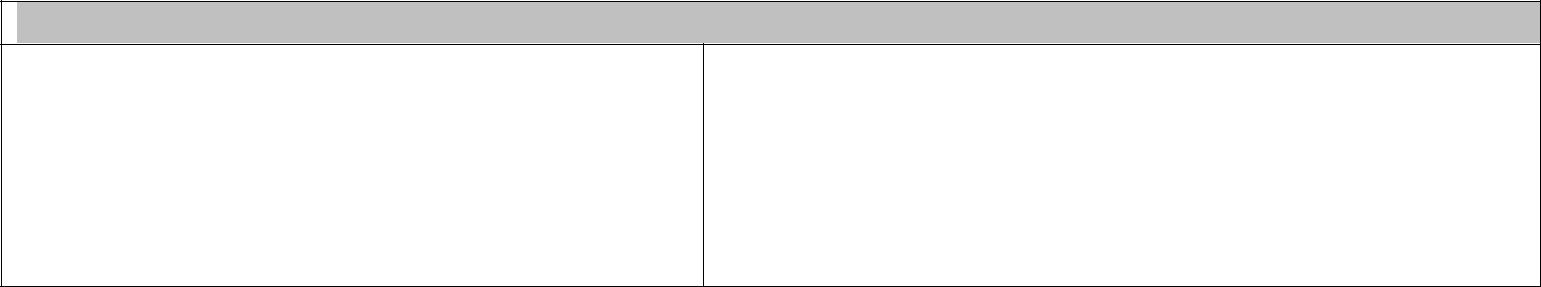
|  |  |  |
| --- | --- | --- |
| I have read, understood, and by my signature consent to these statements. |  |  |
| I authorize **COTIVITI INDIA PRIVATE LIMITED** to contact my present employer. | Yes | No |



SIGNATURE: 

DATE:29-05-2021

NAME (IN BLOCK LETTERS):CHEKKERA CHAITANYA REDDY



DOCUMENTS REQUIRED (COMPULSORY)

|  |  |  |
| --- | --- | --- |
| Completed & Signed Application Form | Two Passport Size Photographs |  |
|  |  |  |
| Copy of Relevant Education Certificates | **Permanent Address Proof (for criminal check).** |  |
|  | ***Please note:*** *Your name should be mentioned on the address proof.* |  |
|  |  |
| Copy of all past Employment Relieving Letters / Salary ***Accepted address proofs:*** *MTNL Bill / Electricity Bill/ Copy of Rent* | |  |
| Slips | *Agreement/ Passport/ Voter Id/ Driving License.* |  |

*All fields are mandatory* *Strictly Private & Confidential*