

We are committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, marital status, or any other legally recognized protected basis under federal, state or local laws, regulations or ordinances. The information collected by this application is solely to determine suitability for employment, verify identity and maintain employment statistics on applicants.

Applicants with disabilities may be entitled to reasonable accommodation under the terms of the Americans with Disabilities Act and certain state or local laws. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on the Company. Please inform the Company's personnel representative if you need assistance completing any forms or to otherwise participate in the application process.

All applicants are requested to complete the Work Opportunity Tax Credit (WOTC) survey. Please login to <https://wotc.adp.com/?syntelinc> and complete the WOTC survey.

Please provide complete information. An incomplete application may affect consideration for employment.

Complete all fields accurately based on your background and experience. Application form is not complete unless signed and dated where indicated. All dates should be in MM/DD/YYYY format.

In which position(s) are you interested?

List all locations in which you are interested?

How did you hear about employment opportunities with Atos-Syntel?

First Name		Middle Name		Last Name		Today's Date	
Primary Phone	Mobile Phone	Current Address/ City/ State/ Zip		Permanent Address/ City/ State/ Zip			
Date of Birth	SSN No	Marital Status	Passport Number	Nationality	Email Address		

Are you legally authorized to work in the United States? (If hired, original documents will be required)

☐ Yes, I am legally authorized to work in the United States.

If yes, do you now, or will you in the future, require immigration sponsorship for work authorization (e.g., H-1B)? (if hired, verification will be required consistent with federal law.)

☐ Yes, I will require Visa sponsorship in the future.

☐ No, I will not require Visa sponsorship in the future

☐ No, I am not legally authorized to work in the United States.

Are you at least 18 years of age? *(if no, you may be required to provide authorization to work)* ☐ Yes ☐ No

Are you seeking full-time or part-time work? ☐ Full-time ☐ Part-time

On what date are you available to work?

Do you have reliable transportation to work? ☐ Yes ☐ No Are you willing to relocate for a job assignment? ☐ Yes ☐ No

If you are only available for a specific employment location (s) please list.

Are there any days or hours of the week you cannot work? If yes, when

Have you previously been employed by Syntel, Inc. or any of its current or former subsidiaries or affiliated companies?

- ☐ Yes I started employment on the date of _____ and ended employment on the date of _____. I was employed by the entity of _____ and was based at the location of _____. My name on the employee record was _____. My employment id was _____
- ☐ No

Are you related by marriage or otherwise to any past or present employee of the aforementioned Companies? ☐ Yes ☐ No
(if yes, please identify)

Have you previously submitted an application to Syntel, Inc or any of its current or former subsidiaries or affiliated companies?

- ☐ Yes, dated _____ and under the name of _____.
- ☐ No

Education & Qualifications in reverse chronological order

Degree/Diploma	Course of Study	Institution Name	GPA	Year of Passing	Roll no / Registration Number / Exam Seat Number	Status
						<input type="checkbox"/> Completed <input type="checkbox"/> In Progress
						<input type="checkbox"/> Completed <input type="checkbox"/> In Progress
						<input type="checkbox"/> Completed <input type="checkbox"/> In Progress

List employment history in reverse chronological order.

Employer Name	Employee ID/ Work ID	Location	Start Date	End Date
Title	Wages	Duties	Supervisor Name, Title & Contact Details	Contact Number of Employer
Email ID of HR	Full Time/Part Time	Self-employed / Family Business	Agency details if the candidate is deputed from	Reason of Leaving

Please confirm if current employer can be contacted by Atos-Syntel for verification, prior to your joining Atos-Syntel ☐ Yes
☐ No

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Special training or skills (languages, computer skills, etc.) that would be of special benefit in this job for which you are applying:

REFERENCES

(other than family members or previous employers)

1. Name _____ Phone (____) - _____
Address _____
2. Name _____ Phone (____) - _____
Address _____
3. Name _____ Phone (____) - _____
Address _____

Are you subject to any restrictive covenant, non-compete, non-solicitation, intellectual property, or confidentiality agreement which would limit or restrict your ability to work in any way for Atos-Syntel? ☐ Yes ☐ No

If yes, please elaborate.

Have you ever been convicted of a crime? ☐ Yes ☐ No

If yes, please list all convictions (excluding traffic violations for which a fine of \$150 or less was imposed, or any conviction that has been officially sealed, expunged, pardoned, or statutorily eradicated), provide details of all convictions, the nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed and sentence(s) imposed.

Are you a US Military Veteran? ☐ Yes ☐ No

Any offer of employment is contingent on your passing a Background Screening Test that may be required by Atos-Syntel or by our clients. The Background Screening Test may include screening of past employment, education verification, criminal checks, drug screening, compliance with governmental requirements and other background screening based on specific client requirements. If you do not pass a Background Screening Test, you understand and agree that any offer of employment is automatically withdrawn. Any background screening will be conducted by Atos-Syntel or a third party in accordance with the terms of the Fair Credit Reporting Act and applicable state or local law

I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, if any falsified statements, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated.

I hereby certify that the information given by me is true in all respects. I authorize Atos-Syntel and its representatives to investigate all statements contained in this application for any employment related purpose and to contact my prior employers and all others (with the exception of my current employer, who may be contacted upon my consent or my date of joining at Atos-Syntel; whichever occurs earlier for the purpose of verification of the information I have supplied and release same from any liability resulting from the information released. I authorize, employers, schools and other persons named on this application to provide any information or transcripts requested.

I understand that the Immigration Reform and Control Act of November 6, 1986 requires me to prove the legality of my residency or citizenship. I am also aware that the failure to provide such proof at the time of request may legally force my termination. I agree that this application is not an offer of employment. I agree that if I am employed by Atos-Syntel (1) that my contract of employment is at will and may be terminated at any time, with or without notice and with or without cause at the option of either Atos-Syntel or myself; (2) that I will receive wages and benefits and be subject to rules and regulations and that such wages, benefits, rules and regulations are subject to change by Atos-Syntel at any time with or without notice to me; (3) that in partial consideration for my employment, I shall not commence any action or other legal proceeding relating to my employment or the termination thereof more than six months after the event complained of and agree to waive any statute of limitations to the contrary; (4) that my assigned work hours may be modified by Atos-Syntel and if requested, I will be required to work overtime; (5) that this constitutes the entire agreement between Atos-Syntel and myself regarding the stated subject matters and that any and all prior agreements are null and void, and that nothing in any documents published by Atos-Syntel, either before or after this agreement, shall in any way modify the above terms; (6) that subject to the National Labor Relations Act as well as other federal, state or local laws, this agreement cannot be modified by any oral or written representations made by anyone employed by Atos-Syntel, either before or after this agreement is signed, except by a written document directed exclusively to me and signed by an authorized Human Resources representative of Atos-Syntel.

DISCLOSURE AND RELEASE

In connection with my application for employment (including contract for services) with you, I understand that consumer reports may be requested. These reports may include, but not by way of limitation, the following types of information: Names and dates of previous employers, reason for termination of employment, job performance, work experience, accidents, etc. I further understand that such reports may contain information concerning my driving record, workers' compensation claims, credit history (to include obtaining any appropriate credit reports), bankruptcy proceedings, criminal records, school records, social security numbers and date of birth verification from the Social Security Administration, etc., from federal, state, other agencies and former employers which maintain such records. All those contacted will be held harmless and free of any legal liability.

I AUTHORIZE, WITHOUT RESERVATION, ANY COMPANY, PARTY OR AGENCY CONTACTED BY SYNTEL, INC. TO FURNISH THE ABOVE MENTIONED INFORMATION.

I have the right to make a request to the aforementioned companies, upon proper identification and notice, to obtain the nature and substance of all information they provided by virtue of this release.

I hereby authorize procurement of consumer report(s). This authorization shall remain on file and shall serve as ongoing authorization for you to procure consumer reports at any time during my employment (or contract) period.

Printed Name

Date

Should any provision of this agreement be deemed illegal or unenforceable, the provision shall be modified only to the extent necessary to render the provision legal and enforceable and the agreement will be construed as if it never contained the illegal or unenforceable terms.

I have read, understand and agree to the above statements and conditions of employment.

Signature

Date