**Employment Application Form**

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| --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL AND QUALIFICATION DETAILS** | | | |  |  |  |
|  | | | |  |  |  |
| Name: | |  |  | Date: |  |  |
| Date of Birth: | |  |  | Marital Status: |  |  |
| Permanent Address: | |  |  | Present Address: |  |  |
| Telephone No. | |  |  |  |  |  |
| Valid Passport: | | Yes/No | Valid Upto: | Telephone Nos.: |  |  |
| Valid Visa: | | Yes/No | Valid Upto: |  |  |  |
| Onsite/Overseas Experience; if any: | | |  |  |  |  | |
|  |  | |  | E-mail: |  |  |
|  |  | |  |  |  |  |
| Total Experience: |  | |  | IT | Relevant |  |
|  |  | |  |  |  |  |

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| **EDUCATIONAL BACKGROUND** | |  |  |  |  |  |  |
| Examination Passed | From (MM/YY) |  | School/College and Location | | Board & University | | %Marks/CGPA/ |
| (Starting From 10th) | To (MM/YY) |  |  |  |  |  | Division |
|  |  |  |  |  |  |  |  |
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| **TRAINING COURSES ATTENDED** | | | |  |  |  |  |
|  |  |  | |  |  |  | |
| Name of the Course |  | From (DD/MM/YY) | | Name of the Institute/ |  | Whether certificate | |
|  |  | To (DD/MM/YY) | | Organization |  | Awarded |  |
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**EMPLOYMENT DETAILS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| S. No. | Name of Employer | Location | Designation | From  (DD/MM/YY) | To  (DD/MM/YY) | No. of  Months |  | CTC | |  |  | Reasons for  Leaving |  |  |
|  |  |  |  |  |  |  | Joining |  |  | Leaving | |  |  |  |
| 1 |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  | |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  | |  |  |  |  |  |
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**Brief Description of Current Job Responsibilities & your present role:**

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| --- | --- | --- | --- |
| Name of Current Project |  | Team Size |  |
| Skill Used in Projects |  |  |  |
| Roll & Responsibilities |  |  |  |
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| **SALARY DRAWN** | |  |  |  |  |  |  |
| S. No. | Salary Breakup (Components) | |  |  | Monthly | Annual |  |
|  | Current CTC |  |  |  |  |  |  |
| 1 | Current |  |  |  |  |  |  |
|  | Fixed |  |  |  |  |  |  |
|  | Variable |  |  |  |  |  |  |
|  | Monthly | Quarterly | Biannual | Annual |  |  |  |
|  | Amt. | Amt. | Amt. | Amt. |  |  |  |
| 2 | Incentive / Performance Bonus /Ex-Gratia (If Any) | | |  |  |  |  |
| 3 | Monthly in Hand |  |  |  |  |  |  |
| 4 | Salary  Expectations |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
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| --- | --- |
| Expected Joining Time: | Notice Period: |

**Significant Achievements/Contributions you have made in the previous assignments like appreciations awards etc.**

**Please Specify :**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FAMILY DETAILS** |  |  |  |  |  |
|  |  |  |  |  |  |
| Members (Names) | Name Of Organisation / Occupation | Age | Dependent (Yes / No) | Present Location |  |
| Father |  |  |  |  |  |
| Mother |  |  |  |  |  |
| Brother(s) |  |  |  |  |  |
| Sister(s) |  |  |  |  |  |
| Spouse |  |  |  |  |  |
| Children |  |  |  |  |  |
|  |  |  |  |  |  |

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| Have you been referred to us by someone? | |  |  | Yes / No |  |  |
| if yes, give details: | |  |  |  |  |  |
|  | |  |  |  |  |  |
| Do you have any contract/bond with your present Employer? | |  |  | Yes / No |  |  |
| if yes, give details: | |  |  |  |  |  |
| Do you have any objection in making Enquiries from your present Employer? | | |  | Yes / No |  |  |
| Have you ever applied to work for this Company? | |  |  | Yes / No |  |  |
| if yes, give details : | |  |  |  |  |  |
| Have you ever applied H1 Visa/Work Permit by any other Company? | | |  | Yes / No |  |  |
| if yes, give details: | |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Your Location preference : (India/ Overseas) | |  |  |  |  |  |
| What are your specific strengths & Improvement Areas? | |  |  |  |  |  |
|  |  |  |  |  |  |  |
| What are the new technological areas you think you need to pick-up / improve? | | |  |  |  |  |
| PROFESSIONAL REFERENCES: | 1. | 2. | 3. |  |  |  |
| Name: |  |  |  |  |  |  |
| Designation: |  |  |  |  |  |  |
| Name of Organization: |  |  |  |  |  |  |
| Telephone No: |  |  |  |  |  |  |
| Date : | |  |  |  |  |  |
| Place : | |  | Signature of the Candidate | |  |  |