BACKGROUND VERIFICATION FORM

Infosys employee number:

Candidate ID: 1007290775

Infosys Limited

INSTRUCTIONS:

It is mandatory for you to complete the form in all respects Please provide complete and correct information

BACKGROUND VERIFICATION FORM					
Infosys Limited					
Infosys Employee Code	Locati	on	Date Of	Joining	
	HYDERABAD		08-Aug-24		
Candidate ID	1007290775				
UAN no	101666356607				
Personal Information					
Full Name (First, Middle, Last)			Former Name / I (if Applicable)	Maiden Name	
Mouli Sankar Nerji	1		(ppiledbie)		
Father's Name		Nationality	Date Of Birth	Gender	

NERJI SRINIVASA RAO	Indian	01-Jun-99	Male
Social Security Number (if applicable):			

Education Qualification (H	ighest Education)- Ple	ease attach cop	y of Degree an	d Final year n	nark sheet
College Name & Address	University Name	Date attende	d	Qualification	ID/Roll
conege name a nauress	& Address	From	To	Gained	No
Please tick mark the documents subn	I nitted for this qualification alc	ong with this form		Full Time/Pa	rt Time
Mark sheet Provisi	onal Certificate Degr	ee Certificate			
ADITYA INSTITUTE OF	Jawaharlal Nehru	Jul-16	Sep-20	Bachelor	16A51A0
TECHNOLOGY AND	Technological			Of	4A7
MANAGEMENT,TEKKALI	University,			Technolo	
ŕ	Kakinad			gy	
Please tick mark the documents subn		ong with this form		Full Time/Pa	rt Time
Mark sheet Provisi	onal Certificate Degr	ee Certificate		Full	rime
	Gradu	ation details			
College Name & Address	University Name	Date attende	d	Qualification	ID/Roll
	& Address	From	То	Gained	No
ADITYA INSTITUTE OF	Jawaharlal Nehru	Jul-16	Sep-20	Bachelor	16A51A0
TECHNOLOGY AND	Technological			Of	4A7
MANAGEMENT,TEKKALI	University,			Technolo	
	Kakinad			gy	
Please tick mark the documents subn		ong with this form		Full Time/Pa	rt Time
Mark sheet Provisi	onal Certificate Degr	ee Certificate		Full ⁻	Гіте
Please account for any and	l all Education gans o	f more than 3 r	months:		
From:	To:	Reason:	THORIENTS:		
110111.	10.	il i			
Complete Address and Loc	ations				
Complete Address and Loc	ation:				
From:	To:		Reason:		
ri VIII.	10.		Reason:		
Complete Address and Las	ation:				
Complete Address and Loc	auuli.				

		of last 7 years of Employment o	
		py of your relieving letter/service necessary – e.g. If Co. is closed, do menti	
	your previous employer	did not provide one, please mention an	d state reasons for the same.
Name of Employer(1): Cognizant		Address of Employer(1): F2, Manyata Tech Park Rd, M Nagavara, Bengaluru, Karnata	
Telephone No:	Employee	Designation:	
9986280906	Code/No: 908262	Software Engineer	
Employment Period:		Manager's Name(optional):	Manager's Contact No(optional):
From: 09-Feb-21	To: 01-Aug-24		Manager's Email ID(optional):
Agency Details (if temporary	y or contractual), provide	Reasons for leaving:	
details:		Looking for better opportunit technologies	ties and exploring new
Specify:			
		of last 7 years of Employment o	
		necessary – e.g. If Co. is closed, do menti	
	your previous employer	did not provide one, please mention an	d state reasons for the same.
Name of Employer(2):		Address of Employer(2):	
Telephone No:	Employee Code/No:	Designation:	
Employment Period:		Manager's Name:	Manager's Contact No:
From:	То:		Manager's Email ID:
Agency Details (if temporardetails:	y or contractual), provide	Reasons for leaving:	
Please tick mark the doc			

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Specify:				
				1
		on of last 7 years of En copy of your relieving I		
		r necessary – e.g. If Co. is c		
	If your previous employ	ver did not provide one, ple		reasons for the same.
Name of Employer(3):		Address of Employe	er(3):	
elephone No:	Employee	Designation:		
elephone No.	Code/No:	Designation.		
Employment Period:		Manager's Name:		Manager's Contact No
rom:	To:			Manager's Email ID:
agency Details (if tempora letails:	ary or contractual), provid	e Reasons for leaving	;:	
Please tick mark the do	cuments submitted for	this employment:		
			e Any Other	
Please tick mark the do	cuments submitted for Relieving letter	this employment: Offer letter None	e Any Other	
Service Certificate	Relieving letter		e Any Other	
Service Certificate	Relieving letter		e Any Other	
Service Certificate	Relieving letter	Offer letter None		two Employers
Service Certificate specify: Previous Employm	Relieving letter	Offer letter None	nployment or last	
Service Certificate Specify: Previous Employments of the complexity of the complexit	Relieving letter ent History (Inclusion) Please attach a comment	Offer letter None	nployment or last letter/service certi	ficate
Service Certificate specify: Previous Employm whichever is highe Note: Ensure that you of	Relieving letter ent History (Inclusion) r.) Please attach a come descriptive wherever the sour previous employ	on of last 7 years of Encopy of your relieving lar necessary – e.g. If Co. is cover did not provide one, ple	nployment or last letter/service certi losed, do mention it. E ase mention and state	ficate mployee Code/ ID/
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Service Certificate Specify: Previous Employm Whichever is highe Note: Ensure that you of Number is mandatory. Name of Employer(4): Telephone No:	Relieving letter ent History (Inclusion) r.) Please attach a contract of the	on of last 7 years of Encopy of your relieving last recessary – e.g. If Co. is cover did not provide one, ple Address of Employed Designation:	nployment or last letter/service certi losed, do mention it. E ase mention and state	ficate Imployee Code/ ID/ reasons for the same.
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Service Certificate Specify: Previous Employm whichever is highe Note: Ensure that you of Number is mandatory. Name of Employer(4): Felephone No: Employment Period: From:	ent History (Inclusion) ent History (Inclusion) r.) Please attach a content of the descriptive wherever the description where the description wh	on of last 7 years of Encopy of your relieving last recessary – e.g. If Co. is cover did not provide one, ple Address of Employed Designation: Manager's Name:	nployment or last letter/service certi losed, do mention it. E ase mention and state er(4):	ficate Imployee Code/ ID/ I reasons for the same. Manager's Contact No

Service Certificate R	elieving letter	Offer letter	None	Any Other	
Specify:					
Previous Employment F whichever is higher.) Pl					
Note: Ensure that you are de Number is mandatory. If you	scriptive wherever	necessary – e.g. If	Co. is closed,	do mention it. Er	nployee Code/ ID/
Name of Employer(5):	. previous employe		mployer(5):		reasons for the same.
Telephone No:	Employee Code/No:	Designation	:		
Employment Period:		Manager's N	Name:		Manager's Contact No:
From:	То:				Manager's Email ID:
Agency Details (if temporary or details:	 contractual), provide	Reasons for	leaving:		
Please tick mark the docume	nts submitted for t	this employment:			
Service Certificate R	elieving letter	Offer letter	None	Any Other	
Specify:	_				
Previous Employment F whichever is higher.) Pl					
Note: Ensure that you are de Number is mandatory. If you					
Name of Employer (6):	,		Employer (6):		,
Telephone No:	Employee Code/No:	Designation	:		
Employment Period:		Manager's N	Name:		Manager's Contact No:
From:	То:				Manager's Email ID:
Agency Details (if temporary or details:	 contractual), provide	Reasons for	leaving:		

Please tick mark the do	cuments submitted for	this employment:	<u> </u>		
Service Certificate	Relieving letter	Offer letter	None	Any Other	
Specify :					
Provious Employme	ont History (Inclusi	on of last 7 yea	rs of Emplo	yment or last two Emp	Novors
whichever is higher					noyers
Note: Ensure that you a	re descriptive whereve	er necessary – e.g.	lf Co. is closed,	do mention it. Employee C	
Number is mandatory. I Name of Employer (7):	f your previous employ	· · · · · · · · · · · · · · · · · · ·	one, please m Employer (7):	ention and state reasons fo	or the same.
Name of Employer (7).		Address of	Employer (7).		
Telephone No:	Employee Code/No:	Designatio	n:		
Employment Period:		Manager's	Name:	Manage	r's Contact No:
From:	То:			Manage	r's Email ID:
Please tick mark the doc Service Certificate Specify:	Relieving letter	this employment:	None	Any Other	
Please account for an	y and all employme	nt gaps of more t	than 3 month	S:	
From:	То:	Reason:			
Complete Address an	d Location:				
From:	То:	Reason:			
Complete Address an	d Location:				
From:	То:	Reason:			
Complete Address an	d Location:				

Please account for any a	nd all gaps of more	e than 3 months between last education and first		
employment	ma am Baka at mare			
From:	To:	Reason:		
01-Oct-20	09-Feb-21	I got joining date on February post completion of		
		graduation		
Complete Address and Loc				
It is completely covid - 19	9 time, i am in hom	e.		
From:	То:	Reason:		
Complete Address and Loc	ation:			
From:	То:	Reason:		
Complete Address and Loc	ation:			
Please account for any a Education	nd all gaps of more	e than 3 months between last Employment and Higher		
From:	То:	Reason:		
Complete Address and Loc	ation:			
From:	То:	Reason:		
Complete Address and Location:				
From:	То:	Reason:		
Complete Address and Loc	ation:			

Documents Required

Education:

• Photocopy of degree certificate and all mark sheets or consolidated mark sheet including all semesters/years.

For Bangalore University:

- A photo copy of both sides of Degree Certificate
- Copies of Marks sheet/Grade card for all years of attendance
- Name of college through which candidate has graduated

Employment:

• Photocopy of relieving / experience letter

Letter of Authorization

To whom it may concern

I hereby authorize Infosys Limited ("Infosys") and any of its representatives (NASSCOM approved Agency) to verify all the information provided in my application of employment and to conduct such enquiries as may be required by Infosys Limited to verify facts of all such information provided by me. I hereby declare that this authorization shall be valid till such time I remain an employee of Infosys.

I hereby authorize all Individuals, Private Establishments, Government Establishments/Agencies; Educational Institutions who may have information relevant to this enquiry to co-operate and disclose to Infosys and/or its representatives such information as may be required. I hereby release Infosys, all its personnel and representatives from any liability which could result, either directly or indirectly, from the disclosure of information by a third party to another party in response to such enquiries.

Further, I understand and accept that the background check reports may be reviewed by external/internal auditors, for lawful purposes, from time to time as part of the customers obligations, to the extent permitted by the applicable laws in force and understand that all applicable privacy laws will be maintained, in such circumstances.

Signature:	
Name in Block Capitals:	
Date:	