## Candidate Information Form (CIF) – Mindtree Ltd – **Marriott project**

***Instructions***: Please provide all the information requested in this form. Incomplete Candidate Information Forms will be returned for completion. **All** supporting documents **must** accompany this form. **Legible** photocopies are requested please**.**

**PART A - PERSONAL DETAILS**:

Full Name (First/Middle/Last): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth (DD/MM/YY):\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nationality: \_\_\_\_\_\_\_\_\_\_\_ \_\_

You’re Phone Number (Land Line and/or Mobile):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security Number (If worked/studied in the US/Any other Country):

NSR ITPIN Number**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Change of Name if Applicable**

Former Name/Maiden Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Name Change: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Kindly Provide the Address where you resided for past 7 years, Please fill the details in BLOCK LETTERS).**

**Current Address**

Door/Flat No, Street, Area: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_**

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PIN: \_\_\_\_\_\_\_ \_\_\_\_

Landmark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: (Landline)

Period of Stay: \_From - To \_\_\_\_\_\_\_\_\_\_\_\_\_\_(Month & Year Mandatory, MM/YYYY)

**Previous to Current Address**

Door/Flat No, Street, Area: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_**

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PIN: \_\_\_\_\_\_\_ \_\_\_\_

Landmark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: (Landline)

Period of Stay: \_From - To \_\_\_\_\_\_\_\_\_\_\_\_\_\_(Month & Year Mandatory, MM/YYYY)

**Previous to Previous Address**

Door/Flat No, Street, Area: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_**

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PIN: \_\_\_\_\_\_\_ \_\_\_\_

Landmark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: (Landline)

Period of Stay: \_From - To \_\_\_\_\_\_\_\_\_\_\_\_\_\_(Month & Year Mandatory, MM/YYYY)

**Previous to Previous Address**

Door/Flat No, Street, Area: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_**

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PIN: \_\_\_\_\_\_\_ \_\_\_\_

Landmark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: (Landline)

Period of Stay: \_From - To \_\_\_\_\_\_\_\_\_\_\_\_\_\_(Month & Year Mandatory, MM/YYYY)

**Previous to Previous Address**

Door/Flat No, Street, Area: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_**

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PIN: \_\_\_\_\_\_\_ \_\_\_\_

Landmark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: (Landline)

Period of Stay: \_From - To \_\_\_\_\_\_\_\_\_\_\_\_\_\_(Month & Year Mandatory, MM/YYYY)

**Permanent Address**

Door/Flat No, Street, Area: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_**

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PIN: \_\_\_\_\_\_\_ \_\_\_\_

Landmark: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: (Landline)

Period of Stay: \_From - To \_\_\_\_\_\_\_\_\_\_\_\_\_\_(Month & Year Mandatory, MM/YYYY))

# **Note: Please attach a legible photocopy of any one of following documents:**

1. Passport 2. PAN Card

**PART B – 2 HIGHEST EDUCATION DETAILS (If Graduation is highest education, please fill PU details)**

|  |  |  |
| --- | --- | --- |
| **\*1ST Highest education** | | |
| **Name of the Institute/School/College :** | | |
| **Board/University :** | | **Division/Class/% :** |
| **Duration of Study (specify month & year):** | | **Degree Obtained :** |
| **Majored in :** | | **Course Type : Regular [ ] Distance [ ]** |
| **Student ID/Enrolment/Registration/Roll No :** | | |
| **Address of Institute/School/College** | **Building No & Street:** | |
| **City:** | **State:** |
| **Pin:** | **Landline :** |
| **\*2nd highest education** | | |
| **Name of the Institute/School/College :** | | |
| **Board/University :** | | **Division/Class/% :** |
| **Duration of Study (specify month & year):** | | **Degree Obtained :** |
| **Majored in :** | | **Course Type : Regular [ ] Distance [ ]** |
| **Student ID/Enrolment/Registration/Roll No :** | | |
| **Address of Institute/School/College** | **Building No & Street:** | |
| **City:** | **State:** |
| **Pin:** | **Landline :** |

# **Note: Please attach legible photo copies of the following documents relevant to the entries above.**

1) Mark sheets 2) Convocation Certificate 3) Provisional Degree Certificate

**PREVIOUS EMPLOYMENT DETAILS [Last 7 years of experience]**

|  |  |  |
| --- | --- | --- |
| **Employment – 1** | | |
| **Name of Company:** | | |
| **Company Address**  **(Where you were employed )** | **Building No & Street:** | |
| **City:** | **State:** |
| **Pin:** | ** (Landline):** |
| **Period of employment:** | | **Employee ID:** |
| **Designation & Department:** | | **Last Drawn Salary (CTC):** |
| **Type of Employment: Permanent [ ] Contractual [ ] Part time [ ] Full Time [ ]** | | |
| **Supervisor’s Name & Designation:** | | **Supervisor’s Direct Number & Mail Id:** |
| Can the employer be contacted now? [ ] Yes [ ] No | | |
| If not, then provide an alternate date: Reason for Leaving: | | |
| **Employment – 2** | | |
| **Name of Company:** | | |
| **Company Address**  **(Where you were employed )** | **Building No & Street:** | |
| **City:** | **State:** |
| **Pin:** | ** (Landline):** |
| **Period of employment:** | | **Employee ID:** |
| **Designation & Department:** | | **Last Drawn Salary (CTC):** |
| **Type of Employment: Permanent [ ] Contractual [ ] Part time [ ] Full Time [ ]** | | |
| Can the employer be contacted now? [ ] Yes [ ] No | | |
| If not, then provide an alternate date: Reason for Leaving: | | |

|  |  |  |
| --- | --- | --- |
| **Employment – 3** | | |
| **Name of Company:** | | |
| **Company Address**  **(Where you were employed )** | **Building No & Street:** | |
| **City:** | **State:** |
| **Pin:** | ** (Landline):** |
| **Period of employment:** | | **Employee ID:** |
| **Designation & Department:** | | **Last Drawn Salary (CTC):** |
| **Type of Employment: Permanent [ ] Contractual [ ] Part time [ ] Full Time [ ]** | | |
| **Supervisor’s Name & Designation:** | | **Supervisor’s Direct Number & Mail Id:** |
| Can the employer be contacted now? [ ] Yes [ ] No | | |
| If not, then provide an alternate date: Reason for Leaving: | | |
| **Employment – 4** | | |
| **Name of Company:** | | |
| **Company Address**  **(Where you were employed )** | **Building No & Street:** | |
| **City:** | **State:** |
| **Pin:** | ** (Landline):** |
| **Period of employment:** | | **Employee ID:** |
| **Designation & Department:** | | **Last Drawn Salary (CTC):** |
| **Type of Employment: Permanent [ ] Contractual [ ] Part time [ ] Full Time [ ]** | | |
| Can the employer be contacted now? [ ] Yes [ ] No | | |
| If not, then provide an alternate date: Reason for Leaving: | | |

# **Note: Please attach legible photo copies of the following documents relevant to the entries above.** 1) Relieving Letter 2) Experience certificate 3) Salary Slip

**Letter of Authorization**

**T o whom it may concern**

I understand that the information provided by me may be used by any third party agency appointed by the organization to verify and validate the information I have provided including my employment, my personal background, professional standing, work history and qualifications etc.

I understand that the organization or the third party agency appointed by the organization may obtain information it deems appropriate from various sources including, but not limited to current and past employers, criminal conviction records, university / school / college records, professional and personal references and other verifying sources / authorities.

I authorize, without reservation, any individual, corporation or other private or public entity to furnish the organization or the third party agency appointed by the organization, all information about me.

I unconditionally release and hold harmless any individual, corporation, or private or public entity from any and all causes of action that might arise from furnishing to the organization or the third party agency appointed by the organization, that they may request pursuant to this release.

This authorization and release, in original, faxed or photocopied form, shall be valid for this and any future references.

|  |  |
| --- | --- |
| **Signature** |  |
| **Name (In Block Letters)** |  |
| **Date** |  |