**Background Verification Form**

|  |  |
| --- | --- |
| **Personal Information** | |
| First Name | Stephen |
| Middle Name | Joseph |
| Last Name | Samuels |
| Former/Maiden Name | NA |
| Nationality | Indian |
| Gender | Male |
| Marital Status | Single |
| Date of Birth | 29th August 1966 |
| Father's Name | Anthony Eugene Samuels |
| Personal Landline No. | NA |
| Personal Mobile No. | 8826574738 |
| Identification Type | [ ] Passport [ ]Pancard  [ ] Driving License [ ] Voter Id  [X ] Aadhar Card |
| Identification Number | 341338046238 |
| National Identity Number | NA |
| Social Security Number | NA |
| Universal Account Number (UAN) | 100363280746 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Current Address** | | | |
| House / Flat Number | Provident Welworth City, Block G12, Flat No 404, | | |
| Building Number & Name | Doddaballapura Main Road, Yelahanka, | | |
| Address Line 1 | Marasandra Amainkere, VTC: Marasandra, | | |
| Address Line 2 | PO: Doddatumkur, | | |
| City | Bengaluru Rural, | Postal/ Zip Code | 562163 |
| State | Karnataka | Country | India |
| Prominent Landmark |  | | |
| Period of Stay | Since January 2020 | | |
| Landline Number | NA | Mobile Number | 8826574738 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Permanent Address** | | | |
| House / Flat Number | Same as Current | | |
| Building Number & Name |  | | |
| Address Line 1 |  | | |
| Address Line 2 |  | | |
| City |  | Postal/ Zip Code |  |
| State |  | Country |  |
| Prominent Landmark |  | | |
| Period of Stay |  | | |
| Landline Number |  | Mobile Number |  |

**Education Section**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Qualification 1** | | | | | |
| Name of Qualification Obtained | M.A. | | | | |
| School/ College/Institute - Name | Fordham University | | | | |
| School/ College/Institute - Location | New York, U.S. A | | | | |
| School/ College/Institute - Contact No |  | | | | |
| University / Board - Name | Fordham University | | | | |
| University / Board - Location | New York, U.S. A | | | | |
| Enrolment / Roll / Registration Number | 122769932 | | | | |
| Period of Study | 1989-92 | | | | |
| Year of Passing | 92 | Graduated | | [ X] Yes [ ] No [ ] Pursuing | |
| Course Attended | [ X] Regular / Full Time [ ] Part Time [ ] Correspondence | | | | |
| Documents Submitted | [X] Final Year Mark-sheet [ ] Degree Certificate  [ ] Provisional Certificate [ ] Consolidated Marksheet [ ] Other | | | | |
| **Qualification 2** | | | | | |
| Name of Qualification Obtained | B.Sc | | | | |
| School/ College/Institute - Name | Saint Xavier’s College | | | | |
| School/ College/Institute - Location | Calcutta | | | | |
| School/ College/Institute - Contact No |  | | | | |
| University / Board - Name | Calcutta University | | | | |
| University / Board - Location | Calcutta | | | | |
| Enrolment / Roll / Registration Number |  | | | | |
| Period of Study | 1985-88 | | | | |
| Year of Passing | 1988 | | Graduated | | [ X] Yes [ ] No [ ]  Pursuing |
| Course Attended | [X ] Regular / Full Time [ ] Part Time [ ] Correspondence | | | | |
| Documents Submitted | [ ] Final Year Mark-sheet [ X] Degree Certificate  [ ] Provisional Certificate [ ] Consolidated Marksheet [ ] Other | | | | |
| **Qualification 3** | | | | | |
| Name of Qualification Obtained |  | | | | |
| School/ College/Institute - Name |  | | | | |
| School/ College/Institute - Location |  | | | | |
| School/ College/Institute - Contact No |  | | | | |
| University / Board - Name |  | | | | |
| University / Board - Location |  | | | | |
| Enrolment / Roll / Registration Number |  | | | | |
| Period of Study |  | | | | |
| Year of Passing |  | | Graduated | | [ ] Yes [ ] No [ ]  Pursuing |
| Course Attended | [ ] Regular / Full Time [ ] Part Time [ ] Correspondence | | | | |
| Documents Submitted | [ ] Final Year Mark-sheet [ ] Degree Certificate  [ ] Provisional Certificate [ ] Consolidated Marksheet  [ ] Other | | | | |

**Employment Section (\*Mention all your last employment details)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Employer 1** | | | | | | |
| Company Name | **HCL Technologies Ltd.** | | | | | |
| Company Current Status | [ ] Company/Operation Closed [X] Functional [ ] Re-located [ ] Merged with | | | | | |
| Company also Known as | HCL | | | | | |
| Complete Company Address with Landmark | Plot No. 3 ,Udyog Vihar,Phase-I, Gurugram 122016 | | | | | |
| Company Contact No. | **+91 120 4024700** | | | | | |
| City |  | | State | |  | |
| Designation | Associate Project Manager | | Department | |  | |
| Employee ID | 40208646] | | Remuneration  (Last Drawn Salary) | |  | |
| Supervisor Name and Designation |  | | HR Name | |  | |
| Supervisor's Contact No and Email Id |  | | HR Contact No and Email Id | |  | |
| Date of Joining | Aug 11, 2008 | | Date of Exit | | April 13, 2015 | |
| Reason for Leaving | Resignation | | | | | |
| Employment Type | [ X] Full-Time [ ] Part-Time | | | | | |
| Nature of Employment | [ ] Probation [ ] Permanent [ ] Contractual [ ] Temporary | | | | | |
| Documents submitted | [ ] Reliving Letter [X] Experience Letter [ ] Service Letter [ ] Pay Slip [ ] Other | | | | | |
| Third Party | - | | | | | |
| Can we contact HR / Supervisor now (Y/N) if No, then date: - | [X] Yes [ ] No Date: - | | | | | |
| **Employer 2** | | | | | | |
| Company Name | |  | | | | |
| Company Current Status | | [ ] Company/Operation Closed [ ] Functional [ ] Re-located [ ] Merged with | | | | |
| Company also Known as | |  | | | | |
| Complete Company Address with Landmark | |  | | | | |
| Company Contact No. | |  | | | | |
| City | |  | | State | |  |
| Designation | |  | | Department | |  |
| Employee ID | |  | | Remuneration  (Last Drawn Salary) | |  |
| Supervisor Name and Designation | |  | | HR Name | |  |
| Supervisor's Contact No and Email Id | |  | | HR Contact No and Email Id | |  |
| Date of Joining | |  | | Date of Exit | |  |
| Reason for Leaving | |  | | | | |
| Employment Type | | [ ] Full-Time [ ] Part-Time | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Nature of Employment | | [ ] Probation [ ] Permanent [ ] Contractual [ ] Temporary | | | |
| Documents submitted | | [ ] Reliving Letter [ ] Experience Letter [ ] Service Letter [ ] Pay Slip [ ] Other | | | |
| Third Party | | - | | | |
| Can we contact HR / Supervisor now (Y/N) if no, then date: - | | [ ] Yes [ ] No Date: - | | | |
| **Employer 3** | | | | | |
| Company Name |  | | | | |
| Company Current Status | [] Company/Operation Closed [ ] Functional [ ] Re-located [ ] Merged with | | | | |
| Company also Known as | - | | | | |
| Complete Company Address with Landmark |  | | | | |
| Company Contact No. |  | | | | |
| City |  | | | State |  |
| Designation |  | | | Department |  |
| Employee ID |  | | | Remuneration  (Last Drawn Salary) |  |
| Supervisor Name and Designation |  | | | HR Name |  |
| Supervisor's Contact No and Email Id |  | | | HR Contact No and Email Id |  |
| Date of Joining |  | | | Date of Exit |  |
| Reason for Leaving |  | | | | |
| Employment Type | [ ] Full-Time [ ] Part-Time | | | | |
| Nature of Employment | [ ] Probation [ ] Permanent [ ] Contractual [ ] Temporary | | | | |
| Documents submitted | [ ] Reliving Letter [ ] Experience Letter [ ] Service Letter [ ] Pay Slip [ ] Other | | | | |
| Third Party |  | | | | |
| Can we contact HR / Supervisor now (Y/N) if no, then date: - | [ ] Yes [ ] No Date: - | | | | |
| **Employer 4** | | | | | |
| Company Name | |  | | | |
| Company Current Status | | [] Company/Operation Closed [ ] Functional [ ] Re-located [ ] Merged with | | | |
| Company also Known as | |  | | | |
| Complete Company Address with Landmark | |  | | | |
| Company Contact No. | |  | | | |
| City | |  | State | |  |
| Designation | |  | Department | |  |
| Employee ID | |  | Remuneration  (Last Drawn Salary) | |  |
| Supervisor Name and Designation | |  | HR Name | |  |
| Supervisor's Contact No and Email Id | |  | HR Contact No and Email Id | | - |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Date of Joining | | |  | Date of Exit | | |  |
| Reason for Leaving | | |  | | | | |
| Employment Type | | | [ ] Full-Time [ ] Part-Time | | | | |
| Nature of Employment | | | [ ] Probation [ ] Permanent [ ] Contractual [ ] Temporary | | | | |
| Documents submitted | | | [ ] Reliving Letter [ ] Experience Letter [ ] Service Letter [ ] Pay Slip [ ] Other | | | | |
| Third Party | | |  | | | | |
| Can we contact HR / Supervisor now (Y/N) if No, then date:- | | | [ ] Yes [ ] No Date: - | | | | |
| **Employer 5** | | | | | | | |
| Company Name |  | | | | | | |
| Company Current Status | [ ] Company/Operation Closed [ ] Functional [ ] Re-located [ ] Merged with | | | | | | |
| Company also Known as |  | | | | | | |
| Complete Company Address with Landmark |  | | | | | | |
| Company Contact No. |  | | | | | | |
| City |  | | | | State |  | |
| Designation |  | | | | Department |  | |
| Employee ID |  | | | | Remuneration  (Last Drawn Salary) |  | |
| Supervisor Name and Designation |  | | | | HR Name |  | |
| Supervisor's Contact No and Email Id |  | | | | HR Contact No and Email Id |  | |
| Date of Joining |  | | | | Date of Exit |  | |
| Reason for Leaving |  | | | | | | |
| Employment Type | [ ] Full-Time [ ] Part-Time | | | | | | |
| Nature of Employment | [ ] Probation [ ] Permanent [ ] Contractual [ ] Temporary | | | | | | |
| Documents submitted | [ ] Reliving Letter [ ] Experience Letter [ ] Service Letter [ ] Pay Slip [ ] Other | | | | | | |
| Third Party |  | | | | | | |
| Can we contact HR  / Supervisor now (Y/N) if No, then date:- | [ ] Yes [ ] No Date: - | | | | | | |
| **Employer 6** | | | | | | | |
| Company Name | |  | | | | | |
| Company Current Status | | [ ] Company/Operation Closed [ ] Functional [ ] Re-located [ ] Merged with | | | | | |
| Company also Known as | | - | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Complete Company Address with Landmark |  | | |
| Company Contact No. |  | | |
| City |  | State |  |
| Designation |  | Department |  |
| Employee ID |  | Remuneration  (Last Drawn Salary) |  |
| Supervisor Name and Designation |  | HR Name |  |
| Supervisor's Contact No and Email Id |  | HR Contact No and Email Id |  |
| Date of Joining |  | Date of Exit |  |
| Reason for Leaving |  | | |
| Employment Type | [ ] Full-Time [ ] Part-Time | | |
| Nature of Employment | [ ] Probation [ ] Permanent [ ] Contractual [ ] Temporary | | |
| Documents submitted | [ ] Reliving Letter [ ] Experience Letter [ ] Service Letter [ ] Pay Slip [ ] Other | | |
| Third Party | - | | |
| Can we contact HR / Supervisor now (Y/N) if No, then date:- | [] Yes [ ] No Date: - | | |

**Reference Section**

o.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sr.  No. | Name | Designation | Organization | Relationship | Contact Number | Email ID |
| 1. | Michael Samuel | Contractor | Apexon | Brother | 88610 87515 | Michael.Samuel@apexon.com |
| 2. |  |  |  |  |  |  |

**Letter of Authorization from the Employee / Candidate**

**To whom so ever it may concern**

1) I understand that the information provided by me may be used by Apexon (organization / employer) or 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.

2) 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.

3) 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.

4) I unconditionally release and hold harmless any individual, corporation, or private or public entity from 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.

5) I understand that if I submit any falsified information or documents, I may be subject to legal proceedings and my complete information may be shared with the verifying source / relevant authorities.

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

|  |  |  |
| --- | --- | --- |
| Signature | Signature |  |
| Name  (In Block Letters) | STEPHEN JOSEPH SAMUELS |  |
| Date of Birth | 29TH August 1966 |  |
| Date | 26th May 2025 |  |