

Personal Information

Personal Information

Personal Details

Kindly enter your complete name (Full form of the initials) along with your father's name. Please enter the name as mentioned in your documents.

Title	First name*	Middle name	Last name*
Mr	Thamizharasu		Munuswamy

Former name / Maiden name (if applicable)

Gender*
Male

Date of birth*

Day Month Year
10 June 1996

Country of birth*
India

City of birth*
Chennai

Candidate email ID*
thamizharasu007@gmail.com

Alternate email ID

Citizenship*
Indian

Residence status*
Permanent

Have you ever studied or worked in US?
No

Additional Information

Blood group*

O+ve

Current Location*

Chennai

Total experience (Months/Years)

3 Years

Relevant experience (Months/Years)

1 Year

From date (Please enter "NIL" if no employment experience)*

28-Nov-2018

To date (Please enter "NIL" if no employment experience)*

28-Dec-2021

Language Proficiency

Please Indicate your language abilities starting with your Native Language. Please click on "click here to add more" to provide multiple Language details.

Language name 1

Tamil

Language proficiency 1

Can Understand~==Can Read~==Can Speak~==Can Write~==

Language name 2

English

Language proficiency 2

Can Understand~==Can Read~==Can Speak~==Can Write~==

Language name 3

Hindi

Language proficiency 3

Can Read~==Can Write~==

Language name 4

Language proficiency 4

Language name 5

Language proficiency 5

Language name 6

Language proficiency 6

Language name 7

Language proficiency 7

Language name 8

Language proficiency 8

Language name 9

Language proficiency 9

Language name 10

Language proficiency 10

Family Details

Father’s Detail

Title*	First name*	Last name*	Citizenship*	Country of Birth*
Mr	Munuswamy	Govindan	Indian	India

Mother's Detail

Title*	First name*	Last name*	Citizenship*	Country of Birth*
Mrs	Prabhavathi	Munuswamy	Indian	India

Candidate contact details

Home Phone*

Country Code	Area Code	Phone No.
+91	044	22643666

Office Phone*

Country Code	Area Code	Phone No.
-	-	-

Mobile Number*

Country Phone No.
Code
+91 9840823080

Emergency Contact details

Please provide the name of individual who can be contacted in the event of an emergency.

Name* Prabhavathi
Relationship with you* Mother

Address Line 1* 7/118, Bharathi street
Address Line 2 C. Pallavaram

City* Chennai
State* Tamilnadu

Country* India
Postal code* 600043

Email address*
thamizharasu007@gmail.com

Emergency Contact Details
Mobile Number

Mobile number

Country Phone No.
Code
+91 9841477455

Do you have a license to practice law with one of the Indian State Bar Councils?*

No

NOTE:

- *Please complete all mandatory fields (indicated with an asterix*) and save the information you have entered by clicking on the "Save" button before leaving this page.*
 - *Failure to do so will result in loss of all information entered.*
-

Education

Education (Highest Qualification)

Education Details

*** Please enter all education details (Graduation, Post-Graduation, professional qualifications, if any)**

To add more qualification go to click here to add more option at bottom of education page

Complete name of qualification/degree*

Bachelor of Technology

Please enter the name of your complete qualification; do not use any abbreviation. Mention the full form of the qualification

Complete name of College/Institution attended*

Easwari Engineering College

University name*

Anna University

University city

Chennai

Major subject name

Information Technology

Full time / Part time

Full Time

Dates attended (From)*

Dates attended (To)*

(Please enter Month and Year)

Day Month Year

02 August 2014

Day Month Year

05 May 2018

Graduated*

Yes

Graduation date*

25-May-2018

(Please enter Month and Year)

Country of Graduation*

India

Registration / Roll number*

310614205108

Grade \ Marks \ CPA

7.35

Please provide the below details only if you have Post Graduation Degree or else click on No.

Do you have a CPA License?*

No

NOTE:

- Please complete all mandatory fields (indicated with an asterix*) and save the information you have entered by clicking on the "Save" button before leaving this page.***
 - Failure to do so will result in loss of all information entered.***
-

Employment

HR

*** Starting with your present or most recent employer, please list ALL dates of employment. Enter your seven years employment details.**

Check this box if you have no prior work experience ☐

To add more employment details go to click here to add more option at bottom of employment page

Kindly provide your details exactly as mentioned in your experience/service letter/relieving letter. If you are presently working, please refer to the offer letter / Last Payslip for exact start date or last designation.

Kindly place a tick mark in this check box once you have read above instructions.* ~~~

Is this your current employer?*

Yes

Dates employed (From)*

Day Month Year
28 November 2018

Dates employed (To)*

Day Month Year
28 December 2021

Kindly confirm if you have Resignation Acceptance letter for your Current Employment*

No

Employer Details

Accenture

Accenture Chennai - Shriram The Gateway SEZ India•Asia Pacific Address: Shriram, The Gateway SEZ, Block B1, B6, A6, B5, B4
& A1, No.16, GST Road, New Perungalathur, Tambaram Taluk,, Chennai, Tamil Nadu, India, 600063 Contact Phone-
+914443462000 Fax- +914443462001

Chennai

Application Development Analyst/Software Engineering Analyst

Operations

11657782

Permanent

INR

5.25LPA

No

INR

12.5LPA

Better opportunities

Notice period*

90 days

Self employment/Family business*

Nil

Supervisor Details**Supervisor name***

Leo Prabu

Supervisor designation*

Software Engineering Team Lead/Application Development Team Lead

Supervisor contact details*

+91 9843717676

Supervisor email address*

leoprabu.shanmugam@accenture.com

Number of direct reportees**NOTE:**

- *Please complete all mandatory fields (indicated with an asterix*) and save the information you have entered by clicking on the "Save" button before leaving this page.*
 - *Failure to do so will result in loss of all information entered.*
-

Address

Current Address - Physical Verification

Please enter your Current address details.

Address Details

Apartment/Flat/House/Unit number*

7/118

Building/Apartment name*

Maragadham Residence

Area/Locality name*

C. Pallavaram

Street / Road Name*

Bharathi Street

City/Town/Suburb/Area/District*

600043 Tamil Nadu Chennai

County / State*

Tamilnadu

Landmark (Within 50 - 75 meters of address)*

Near Thandumariamman koil street

Country*

India

Post / ZIP code*

600043

Father's name*

Munuswamy G

Contact Details and Period of Stay

Hand phone (Cell phone)

9840823080

Land line

04422643666

Period of stay (From)*

Day Month Year

10 June 1996

Period of stay (to)*

Day Month Year

14 November 2021

In case of any overseas address, please provide us the contact details of your overseas location.

Other Details

Nationality

National identity number

National insurance number

Social insurance number

Social security number (SSN)

Additional information

NOTE: Please complete all mandatory fields (indicated with an asterisk) and save the information you have entered by clicking on the "Save" button before logging out. Failure to do so will result in all information entered to be lost.

Permanent address - Physical Verification

Please enter your Permanent address details.

Address Details

Apartment/Flat/House/Unit number*

7/118

Building/ Apartment name*

Maragadham Residence

Area/Locality name*

C. Pallavaram

Street / Road Name*

Bharathi Street

City/Town/Suburb/Area/District*

Chennai/C. Pallavaram/ Chengalpattu

County / State*

Tamilnadu

Landmark (Within 50 - 75 meters of address)*

Near Thandumariamman Koil

Country*

Tamilnadu

Post / ZIP Code*

600043

Father's name*

Munuswamy G

Contact Details and Period of Stay

Hand phone (Cell phone)

9840823080

Land line

04422643666

Period of stay (From)*

Day Month Year

10 June 1996

Period of stay (to)*

Day	Month	Year
14	November	2021

In case of any overseas address, please provide us the contact details of your overseas location.

Other Details

Nationality

National identity number

National insurance number

Social insurance number

Social security number (SSN)

Additional information

NOTE: Please complete all mandatory fields (indicated with an asterisk) and save the information you have entered by clicking on the "Save" button before logging out. Failure to do so will result in all information entered to be lost.

Previous address - Physical Verification

Address Details

Please enter all your previous address in last seven years without any gap along with the pin code and period of stay. Address should match with the ones listed in criminal court.

Apartment/Flat/House/Unit number*

7/118

Building/ Apartment name*

Maragadham Residence

Area/Locality name*

C. Pallavaram

Street / Road Name*

Bharathi Street

City/Town/Suburb/Area/District*

Chennai

County / State*

Tamilnadu

Landmark (Within 50 - 75 meters of address)*

Near Thandumariamman koil

Country*

India

Post / ZIP code*

600043

Father's name*

Munuswamy G

Contact Details and Period of Stay

Hand phone (Cell phone)

9840823080

Land line

22643666

Period of stay (From)*

Day Month Year

10 June 1996

Period of stay (To)*

Day	Month	Year
14	November	2021

In case of any overseas address, please provide us the contact details of your overseas location.

Other Details

Nationality

National identity number

National insurance number

Social insurance number

Social security number (SSN)

Additional information

Have you entered last 7 years address details ?*

Yes

By Clicking " YES" you have acknowledged that 7 Years address is provided from your end, in case of any mismatch it will impact your Onboarding. Thank you for understanding the requirement.

NOTE: Please complete all mandatory fields (indicated with an asterisk) and save the information you have entered by clicking on the "Save" button

before logging out. Failure to do so will result in all information entered to be lost.

Passport Investigation

Passport-MRZ

Do you have a Passport?

Yes

Personal Details

Given name as per passport*

Thamizharasu

Surname as per passport*

Munuswamy

Date of birth*

Day Month Year

10 June 1996

Passport Details

Place of issue*

Chennai

Date of issue*

Day Month Year

14 November 2018

Date of expiry*

Day Month Year

13 November 2028

Passport number*

S7442617

Nationality*

INDIAN

NOTE: Please complete all mandatory fields (indicated with an asterisk) and save the information you have entered by clicking on the "Save" button before logging out. Failure to do so will result in all information entered to be lost.

Pan card Verification

Pan Card Verification

Provide available and relevant details only. Enter "NA" wherever the field is Not applicable.

Do you have a PAN Card?*

Yes

Please enter your Pan card details.

Candidate details

Name as per pan card*

Thamizharasu

Date of birth*

10-06-1996

Pan Card number*

AWCPT1540L

NOTE: Please complete all mandatory fields (indicated with an asterisk) and save the information you have entered by clicking on the "Save" button before logging out. Failure to do so will result in all information entered to be lost.

Criminal

Court records

Personal Details

Kindly provide your address history for last seven years and in following sequence (Current, Permanent and Previous) without any gap along with the pin code and period of stay. Address should match with the ones listed in previous address.

Kindly enter your complete name (Full form of the initials) along with your father's name. Please enter the name as mentioned in your documents.

Type of address*

Permanent

Candidate's full name

Thamizharasu M

Date of birth*

Day Month Year

10 June 1996

Father's name*

Munuswamy G

Address Details

Flat number*

7/118

Apartment number/ Unit/ House/ Building*

Maragadham Residence

Building number and name & road name*

Bharathi Street

Landmark*

Near Thandumariamman Koil

City/ Town/ Area/ District*

C. Pallavaram

City name*

Chennai

Address Pin ZIP/Pin/ Postal code*

600043

Country & City/ State acquired*

India & Chennai

State / County/ Province/ Prefecture*

Tamilnadu

Contact Details and Period of Stay

Contact phone number

9840823080

Period of stay (From)

Day Month Year

10 June 1996

Period of stay (To)

Day Month Year

14 November 2021

Have you entered last 7 years address details ?*

Yes

By Clicking " YES" you have acknowledged that 7 Years address is provided from your end, in case of any mismatch it will impact your Onboarding. Thank you for understanding the requirement.

NOTE: Please complete all mandatory fields (indicated with an asterisk) and save the information you have entered by clicking on the "Save" button before logging out. Failure to do so will result in all information entered to be lost.

Criminal Search

Criminal Search

Please enter all your previous address in last seven years without any gap .

Type of address

Permanent

Candidate's full name*

Thamizharasu M

Date of birth*

Day Month Year

10 June 1996

Flat number*

7/118

Apartment number/ Unit/ House/ Building*

Maragadham Residence

City name*

Chennai

NOTE: Please complete all mandatory fields (indicated with an asterisk) and save the information you have entered by clicking on the "Save" button before logging out. Failure to do so will result in all information entered to be lost.
