

Profile Background Form

Please complete all information. Fields marked with a * are mandatory.

Note: Please avoid using short forms / abbreviations where ever possible.

Personal Details	Client Number: CF-IN-1000-CL Name: cFIRST		Employee ID:
*First Name:	*Middle Name:	*Last Name/Surname:	
*Standard format of writing the name:			
*Have you ever changed your name? <input type="checkbox"/> No <input type="checkbox"/> Yes (Please attach a copy of the name change document) If Yes, name change date: DD/MON/YYYY			
Previous Name(s) / Maiden Name (if applicable)	First Name	Middle Name	Last Name/Surname
*Father's Name	First Name	Middle Name	Last Name/Surname
Complete current address: *City and Postal code *Landmark 1: *Landmark 2: Landline telephone number:			Period of Stay (DD/MON/YYYY): *From: *To:
Permanent Address: *City and Postal code *Landmark 1: *Landmark 2: Landline telephone number:			Period of Stay (DD/MON/YYYY): *From: *To:
*Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married	
*Date of Birth: (DD/MON/YYYY)		*Nationality: SSN / TIN Number:	
Contact Details *Email: Home / Cell #		Passport Details *Number: *Place of Issue:	
*Photo Identification proof (Attach a copy) <input type="checkbox"/> Passport <input type="checkbox"/> PAN card <input type="checkbox"/> Driver license <input type="checkbox"/> Voter ID Photo ID Number _____		*Address proof (Attach a copy) <input type="checkbox"/> Lease/rental agreement <input type="checkbox"/> Bank statement <input type="checkbox"/> Land telephone <input type="checkbox"/> Voter card <input type="checkbox"/> Other _____	

Educational Qualifications

Note: Please attach more educational sheets if necessary

Please complete all the degree/educational qualifications and attach the necessary documents.

Educational Record - Master's Degree / Highest Degree (Please attach copy of degree certificate and all year mark sheets)			
*College Name			
*College Address and Contact Telephone	*College City/State/Country		
*University Name, Address, and Contact Telephone	*University City/State/Country		
*From – To (month / year)	*Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No	*Program <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	*Registration/Roll No.
*Type of degree	*Graduation date (month / year)		*Subject Major
*Copy of the Certificate Attached <input type="checkbox"/> Yes <input type="checkbox"/> No *Educated in Overseas: <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, Unique identification number at Overseas (SSN/TIN) : Given Name at Overseas:			

Employment Details

Note: Please attach more employment sheets if necessary

Please ensure that you are descriptive wherever necessary – For example, if the company no longer exists, acquired, or merged, please do mention it. Employee Code/ ID/ Number are necessary. If your previous employer did not provide you one, please mention and provide us with reasons for the same.

Details of Previous Employer					
*Company Name:					
*Main office Address:			*Company Telephone(Landline):		
			Company Website:		
*Reporting (branch) office Address:			Employment Period: (DD-MON-YYYY)		
			*From:		
			*To:		
Job Details			Reporting Manager's Details		
*Position Held :			*Name :		
*Department:			*Job Title :		
*Employee Code: <input type="checkbox"/> <input type="checkbox"/>			*Department :		
SSN (if applicable):			*Present Contact Number :		
*Employment Type: Permanent Temporary			*Official Email ID :		
*Agency Name and Details:			*Reason(s) for Leaving:		
(Temporary/contractual)					
*Starting Base Salary	*Other Compensation <input type="checkbox"/>	*Total <input type="checkbox"/>	*Final Base Salary	*Other Compensation	*Total
*Is this current employment?: Yes No					
If yes, mention date when verification can be initiated : (DD-MON-YYYY)					
Any other pertinent information:					

Details of Previous Employers - Please attach a copy of your relieving letter/service certificate					
*Company Name:					
*Main office Address:			*Company Telephone(Landline):		
<input type="checkbox"/> <input type="checkbox"/>			Company Website:		
*Reporting (branch) office Address:			Employment Period: (DD-MON-YYYY)		
			*From:		
			*To:		
Job Details *Position Held : *Department: *Employee Code: SSN (if applicable): *Employment Type: Permanent Temporary			Reporting Manager's Details *Name : *Job Title : *Department : *Present Contact Number : *Official Email ID :		
*Agency Name and Details: (Temporary/contractual)			*Reason(s) for Leaving:		
*Starting Base Salary	*Other Compensation	*Total	*Final Base Salary	*Other Compensation	*Total
Any other pertinent information:					

Details of Previous Employers - Please attach a copy of your relieving letter/service certificate					
*Company Name:					
*Main office Address:			*Company Telephone(Landline):		
<input type="checkbox"/> <input type="checkbox"/>			Company Website:		
*Reporting (branch) office Address:			Employment Period: (DD-MON-YYYY)		
			*From:		
			*To:		
Job Details *Position Held : *Department: *Employee Code: SSN (if applicable): *Employment Type: Permanent Temporary			Reporting Manager's Details *Name : *Job Title : *Department : *Present Contact Number : *Official Email ID :		
*Agency Name and Details: (Temporary/contractual)			*Reason(s) for Leaving:		
*Starting Base Salary	*Other Compensation	*Total	*Final Base Salary	*Other Compensation	*Total
Any other pertinent information:					

Note: Please attach more reference sheets if necessary

Detail	Reference 1	Reference 2
*Reference Full Name		
*Designation		
*Company Name		
*Contact Telephone		
*Company Email Address		
*How do you know this person?		
*Can the reference be contacted?	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, please give the reason why and give an alternate reference	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, please give the reason why and give an alternate reference
*Is the reference linked to current employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, mention date reference can be contacted:	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, mention date reference can be contacted:
Additional information		

Professional Reference Details

Note: Please attach more reference sheets if necessary

Detail	Reference 3
*Reference Full Name	
*Designation	
*Company Name	
*Contact Telephone	
*Company Email Address	
*How do you know this person?	
*Can the reference be contacted?	<div> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <div> If No, please give the reason why and give an alternate reference </div>
*Is the reference linked to current employment?	<div> <input type="checkbox"/> Yes <input type="checkbox"/> No </div> <div> If yes, mention date reference can be contacted: </div>
Additional information	

Mandatory Supporting Documents/Instructions

Address check:

- Location details along with 2 landmarks and landline telephone numbers

Education Check:

- Photocopy of the degree certificate and final year mark sheet.
- Registration number or enrollment number

Bangalore University

- Photocopy of both sides of the degree certificate (The reverse side of the certificate has some information which the University would require).
- Copies of Marks Sheets/Grade Card for all the years of attendance.

Roll number, College name and College contact details are mandatory.

Employment Check:

- Photocopy of relieving/experience certificate of each employment.
- Latest month salary slip of each employment

Reference Check: Details provided must be of the reporting manager at the previous company. Please provide full name, designation, land-line telephone number and official email ID.

ID Check:- Passport, Pan card, Aadhaar card

INFORMATION RELEASE FORM

To Whom It May Concern:

I, _____
(Last Name) (First Name) (Middle Name)

hereby authorize my current/prospective employer and/or any of its subsidiaries or affiliates or partners or vendors, and any person or organizations acting on its behalf, to verify information presented in my employment application and to compile a background report for that purpose. I hereby grant authority to the bearer of this letter to access or be provided with full details of my previous employment record held by any company or business for which I previously worked. This information should include, but not be restricted to, the dates of employment, position held, details of my salary upon departure and an appraisal of my performance, capabilities and character. I hereby release from liability any person or entity requesting or supplying such information.

Date:

Candidate Signature

*

Name of the Candidate