

## EMPLOYEE BACKGROUND VERIFICATION FORM

### COMPANY FULL NAME :

Please note that it is mandatory for you to complete the form in all respects. The information you provide must be complete and correct and the same shall be treated in strict confidence. The details on this form will be used for all official requirements should you join the organization.

Position applied for

Job Location

BANGALORE

#### Personal Information

Full Name (First, Middle, Last)

ABDOL SAEF

Former Name / Maiden Name (if Applicable)

Father's Name

CHAND PASHA

Date of Birth (DD/MM/YY)

28-06-1996

Gender

☒ Male

☐ Female

Social Security Number (if applicable)

Nationality

INDIAN

Marital Status

UNMARRIED

#### Current Address

Door No / Plot No

882

Premises Name

Floor

2ND FLOOR

Corss / Main / Street

31ST 'B' CROSS

Village Name

Post

Taluk

District

State

KARNATAKA

Prominent Landmark

CONVANT SCHOOL

Period of stay

15 YEARS

From (Month/Year)

APRIL - 2007

To (Month/Year)

APRIL - 2007

MAY - 2021

Contact Details for Verification

9741341957

Residence Landline Number

9741341957

#### Permanent Address

Door No / Plot No

Premises Name

Floor

Corss / Main / Street

Village Name

Post

Taluk

District

State

Prominent Landmark

Period of stay

From (Month/Year)

To (Month/Year)

Contact Details for Verification

Residence Landline Number

Mobile number

Education Qualification - Please attach copy of Degree and Final year mark sheet

College Name & Address

University Name & Address

Dates Attended

Qualification Gained

ID /Roll No

From

To

dd/mm/yy

dd/mm/yy

1 SUDARSHAN, VIDYA BANGALORE-

MANDIR. PO COLLEGE 26TH 'A' MAIN 4TH

BLOCK JAYANAGAR

BANGALORE-560041

10-03-74

23-11-15

ADMISSION No:-

11/12-13

☒ Full Time  
☐ Part Time

College Name & Address	University Name & Address	Dates Attended		Qualification Gained	ID /Roll No
		From dd/mm/yy	To dd/mm/yy		
2				<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	

College Name & Address	University Name & Address	Dates Attended		Qualification Gained	ID /Roll No
		From dd/mm/yy	To dd/mm/yy		
3				<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	

College Name & Address	University Name & Address	Dates Attended		Qualification Gained	ID /Roll No
		From dd/mm/yy	To dd/mm/yy		
4				<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	

Please tick mark the documents submitted for this qualification along with this form

☐ Marksheet     
 ☐ Provisional Certificate     
 ☐ Degree Certificate     
 ☐ None

Previous Employment History - Please attach a copy of your relieving letter/service certificate

Name of Current Employer - 1 (Last Company)		Address of Current Employer	
Telephone No	Employee Code/No 376721	Designation RELATIONS AIP EXECUTIVE	Department OPERATIONS
Employment Period From 12-08-16 To 01-10-19		Manager's Name	Manager's Contact No
		Manager's Email ID Khatija-Sheikh@praxisredail.in	Can a reference taken now? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Duties & Responsibilities HANDLING FRONTLINE SALES OPERATIONS		Reasons for leaving SHIFTED TO ANOTHER AREA, TRAVELLING ISSUE	
First Salary drawn	Was this Position <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual	Agency Details (if temporary or contractual), provide details	
Last Salary drawn			
Please tick mark the documents submitted for this employment <input checked="" type="checkbox"/> Service Certificate <input checked="" type="checkbox"/> Relieving letter <input type="checkbox"/> Offer letter <input type="checkbox"/> Any Other (please specify) <input type="checkbox"/> None			

Previous Employment History - Please attach a copy of your relieving letter/service certificate

Note: Please ensure that you are descriptive wherever necessary - e.g. If company has closed, do mention it. Employee Code/ ID/ Number is mandatory. If your previous employer did not provide one, please mention and state reasons for the same.

Name of Employer (2)		Address of Employer	
Telephone No	Employee Code/No	Designation	Department
Employment Period From To		Manager's Name	Manager's Contact No
		Manager's Email ID Khatija-Sheikh@praxisredail.in	
Duties & Responsibilities HANDLING FRONTLINE SALES, INVENTORY, STOCKS, HANDLING team. in absence of SM, ETL		Reasons for leaving Shifted to whitefield, travelling issue.	
First Salary drawn	Was this Position <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual	Agency Details (if temporary or contractual), provide details	
Last Salary drawn			
Please tick mark the documents submitted for this employment <input checked="" type="checkbox"/> Service Certificate <input checked="" type="checkbox"/> Relieving letter <input type="checkbox"/> Offer letter <input type="checkbox"/> Any Other (please specify) <input type="checkbox"/> None			



**Previous Employment History - Please attach a copy of your relieving letter/service certificate**

Name of Employer (3)		Address of Employer	
Telephone No	Employee Code/No	Designation	Department
Employment Period		Manager's Name	Manager's Contact No
From	To		Manager's Email ID
Duties & Responsibilities		Reasons for leaving	
First Salary drawn	Was this Position <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Contractual	Agency Details (if temporary or contractual), provide details	
Last Salary drawn			
Please tick mark the documents submitted for this employment <input type="checkbox"/> Service Certificate <input type="checkbox"/> Relieving letter <input type="checkbox"/> Offer letter <input type="checkbox"/> Any Other (please specify) <input type="checkbox"/> None			

**Documents Required (Mandatory)**Education:

- Photocopy of degree certificate and final mark sheet of all examinations

Employment

- Photocopy of relieving / experience letter for each employer mentioned in the form

Identity

- Pan Card / Passport Copy/ Driving License

**Declaration and Authorization**

I hereby authorize GoldQuest Global HR Services Private Limited and its representative to verify information provided in my application for employment and this employee background verification form, and to conduct enquiries as may be necessary, at the company's discretion. I authorize all persons who may have information relevant to this enquiry to disclose it to GoldQuest Global HR Services Pvt Ltd or its representative. I release all persons from liability on account of such disclosure.

I confirm that the above information is correct to the best of my knowledge. I agree that in the event of my obtaining employment, my probationary appointment, confirmation as well as continued employment in the services of the company are subject to clearance of medical test and background verification check done by the company.

Signature: JailName: ABDUL SAEFDate: 08-05-2021



ಭಾರತೀಯ ವಿಕಿತ್ಸ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India  
Government of India

ನೋಂದಾಯಿತ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrolment No 1216/1307/02983

To,

ಅಧ್ಯಕ್ಷರವರಿಗೆ  
Abdul Sali  
C/O Chand Prasha  
#881  
3rd Cross  
Trisk Nagar Jayanagar  
Bangalore South  
Jayanagar Bangalore  
Karnataka 560041

9/41341957

Ref: 173 / 26F / 311133 / 311687 / P



UE624439376IN



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

2094 0967 5510

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ  
GOVERNMENT OF INDIA



ಅಧ್ಯಕ್ಷರವರಿಗೆ  
Abdul Sali  
ಕುಟುಂಬ ಮಾ / Term of Birth : 1996  
ಧರ್ಮ / Name



2094 0967 5510

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಮಾಹಿತಿ

- ಆಧಾರ್ ಎನ್ನುವುದು ಗುರುತಿಸಿದ ಮತ್ತು ನಾಗರಿಕತೆಯನ್ನು ಗುರುತಿಸಿದ ಪುರಾವೆಯನ್ನು ಆನ್‌ಲೈನ್ ಮೂಲಕ ದೃಢೀಕರಿಸಿ ಪಡೆಯಬಹುದಾಗಿದೆ

### INFORMATION

- Aadhaar is proof of identity, not of citizenship.
- To establish identity, authenticate online.

26F / 311133

- ಆಧಾರ್ ಭೇದಾವ್ಯಯ ಮಾನ್ಯತೆಯನ್ನು ಪಡೆದಿದೆ.
- ಭವಿಷ್ಯದಲ್ಲಿ ಸರ್ಕಾರ ಮತ್ತು ಸರ್ಕಾರೀ ಸಂಸ್ಥೆಗಳನ್ನು ಪಡೆಯುವುದಕ್ಕಾಗಿ ಆಧಾರ್ ನಿಮ್ಮ ಸಹಾಯವಾಗುವುದು.
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.



ಭಾರತೀಯ ವಿಕಿತ್ಸ ಗುರುತು ಪ್ರಾಧಿಕಾರ  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

Overall C/O Chand Prasha, #881, 3rd Cross, Trisk Nagar, Jayanagar, Bangalore South, Jayanagar, Bangalore, Karnataka, 560041



Ref: 173 / 26F / 311133 / 311687 / P



आयकर विभाग  
INCOME TAX DEPARTMENT



भारत सरकार  
GOVT. OF INDIA

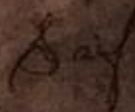
ABDULSAIF

CHANDPASHA

28/06/1996

Permanent Account Number

BQOPA5619L

  
Signature



25052015

**PRAXIS**  
HOME RETAIL LIMITED

Mr. Abdul Saif

Date: 04 December 2019


Emp ID: 376721

TO WHOMSOEVER IT MAY CONCERN

This is to certify that Mr. Abdul Saif (Emp ID: 376721) is working at Praxis Home Retail Limited at HT-CT-Bangalore-J.P.Nagar Tower as Relationship Executive from 12 August, 2016 to 03 December 2019.

For Praxis Home Retail Limited

Yours Sincerely,

  
Khatija Shaikh

Manager - People Office

**Praxis Home Retail Limited**

Survey No. 92/A, Munnekolalla Village, Outer Ring Road, Varthur Hobli, Marathahalli, Near Innovative Multiplex, Bangalore - 560 037.  
Reg. Office : Ground Floor, Jolly Board Tower, D Wing, I Think Techno Campus, Kanjurmarg (East) Mumbai - 400042 Maharashtra

Date : 04 December 2019

Employee Code : 376721  
Employee Name : Mr. Abdul Saif  
Designation : Relationship Executive  
Department : Operations  
Location : HT-CT-Bangalore-J.P.Nagar

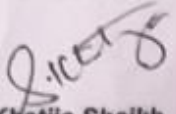
Namaste Mr. Abdul Saif,

This is in reference to your resignation letter dated **November 04, 2019**.

This is to inform you that your resignation has been accepted and you have been relieved from the services **Praxis Home Retail Limited**. from **December 03, 2019**.

We wish you success in your next endeavor.

For Praxis Home Retail Limited,

  
Khatija Shaikh  
Manager – People Office