

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

Voice Over Artist - Marketing

Bangalore

Personal Information

Full Name (First, Middle, Last) – Aparna S

Former Name / Maiden Name (if Applicable)

Father's Name – Shibu B

Date of Birth (DD/MM/YY) – 21/06/91

Gender
☐ Male
☒ Female

Social Security Number (if applicable)

Nationality
 – Indian

Marital Status
 – Married

Current Address

Period of stay

Contact Details for Verification

Door No / Plot No

Flat No - 1

Premises Name

Chanakya Apartments

Floor

Corss / Main / Street

8th Main, 8th Cross

Village Name

Post

Sadashivanagar

Taluk

District

Bangalore

State

Karnataka

Prominent Landmark

Opp. to Sadashivanagar Post Office

From (Month/Year)

Feb 2021

To (Month/Year)

Residence Landline Number

Mobile number

Vengappa Naik - 9448180566

Permanent Address

Period of stay

Contact Details for Verification

Door No / Plot No

Flat No - 3

Premises Name

Classic Mansion

Floor

1st floor

Corss / Main / Street

Mackal Lane

Village Name

Ayyanthole

Post

Kanattukara

Taluk

Thrissur

District

Thrissur

State

Kerala

Prominent Landmark

Behind Bindu Theatre

From (Month/Year)

Feb 2007

To (Month/Year)

Residence Landline Number

Mobile number

Biji Sejo - 9645152358

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		
1 Annamalai University Annamalainagar - 608002 Tamil Nadu India	Annamalai University Annamalainagar - 608002 Tamil Nadu India	dd/mm/yy May 2017	dd/mm/yy May 2020	BSc. Psychology <input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Part Time	1601700186

Previous Employment History - Please attach a copy of your relieving letter/service certificate					
Name of Current Employer - 1 {Last Company} Sun TV Network Pvt. Ltd			Address of Current Employer 73Murasoli Maran Towers, MRC Nagar Main Road MRC Nagar, Chennai - 600028 Tamil Nadu		
Telephone No 0484 4467676	Employee Code/No		Designation VJ / Anchor	Department Surya Music & Surya TV Channels	
Employment Period		Manager's Name Padmakumar	Manager's Contact No 8907788197	Can a reference taken now? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
From Oct 2015	To Aug 2017		Manager's Email ID NIL		
Duties & Responsibilities Presenting TV programmes and creating content			Reasons for leaving Relocated to Maharashtra after marriage		
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 type="checkbox"/> Service Certificate <input type="checkbox"/> Relieving letter <input type="checkbox"/> Offer letter <input checked="" type="checkbox"/> Any Other - TDS (Form 16) for the year 2015 and 2016 <input type="checkbox"/> None (please specify)					
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		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 <input type="checkbox"/> None (please specify)					

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 <input type="checkbox"/> None (please specify)			

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

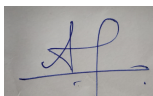
- Pan Card / Passport Copy/ Driving License

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: _____

Name: Aparna SDate: 08-May-2021

टिप्पणी / OBSERVATION

विभिन्न सेवा / MISCELLANEOUS SERVICE

पिता / काकाजी अधिपत्यक का नाम / Name of Father / Legal Guardian

SHIBU BALAN

माता का नाम / Name of Mother

SINI SHIBU

पति या पत्नी का नाम / Name of Spouse

पता / Address,

CLASSIC MANSION, FLAT NO. 3, MACKAL LANE

KANATTUKARA PO, THRISSUR

PIN: 680011, KERALA, INDIA

पुराने पासपोर्ट का नं. और इसके जारी होने की तिथि एवं स्थान / Old Passport No. with Date and Place of Issue

फाइल नं. / File No.

C05067894137714



M1179797

**TDS**

Centralized Processing Cell

TRACES

TDS Reconciliation Analysis and Correction Enabling System

Government of India
Income Tax Department**FORM NO. 16A**

[See rule 31(1)(b)]

Certificate under section 203 of the Income-tax Act, 1961 for tax deducted at source

Certificate No. WCPYYVJ

Last updated on 17-Jan-2016

Name and address of the deductor

Name and address of the deductee

SUN TV NETWORK LIMITED
NO. 73, Murasoli Maran, Towers MRC Nagar Main, Road MRC Nagar,
Chennai - 600028
Tamilnadu
+(91)44-44676767
KUMARK@SUNNETWORK.IN

SHIBU APARNA
3, CLASSIC MANSION, MACKAL LANE,
KANATTUKARA, THRISSUR - 680011 Kerala

PAN of the deductor

TAN of the deductor

PAN of the deductee

AADCS4885K

CHES04526E

BQDPA9857P

CIT (TDS)

Assessment Year

Period

The Commissioner of Income Tax (TDS)
7th Floor, New Block, Aayakar Bhawan, 121, M.G. Road, Chennai -
600034

2016-17

From
01-Oct-2015To
31-Dec-2015**Summary of payment**

Sl. No.

Amount paid/ credited

Nature of payment**

Deductee Reference No.
provided by the Deductor (if
any)Date of payment/ credit
(dd/mm/yyyy)

**TDS**

Centralized Processing Cell

TRACES

TDS Reconciliation Analysis and Correction Enabling System

Government of India
Income Tax Department**FORM NO. 16A**

[See rule 31(1)(b)]

Certificate under section 203 of the Income-tax Act, 1961 for tax deducted at source

Certificate No. NMNROZN

Last updated on 15-May-2016

Name and address of the deductor

Name and address of the deductee

SUN TV NETWORK LIMITED
73 MURASOLI MARAN, TOWERS M.R.C NAGAR MAIN, ROAD
M.R.C NAGAR,
CHENNAI - 600028
Tamilnadu
+(91)44-44676767
KUMARK@SUNNETWORK.IN

SHIBU APARNA
3, CLASSIC MANSION, MACKAL LANE,
KANATTUKARA, THRISSUR - 680011 Kerala

PAN of the deductor

TAN of the deductor

PAN of the deductee

AADCS4885K

CHES04526E

BQDPA9857P

CIT (TDS)

Assessment Year

Period

The Commissioner of Income Tax (TDS)
7th Floor, New Block, Aayakar Bhawan, 121, M.G. Road, Chennai -
600034

2016-17

From
01-Jan-2016To
31-Mar-2016**Summary of payment**

Sl. No.

Amount paid/ credited

Nature of payment**

Deductee Reference No.
provided by the Deductor (if
any)Date of payment/ credit
(dd/mm/yyyy)