

EMPLOYEE BACKGROUND VERIFICATION FORM

COMPANY FULL NAME : Wortgage Technologies Private Limited

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

PARTNER RELTIONSHIP MANAGER

Bengaluru

Personal Information

Full Name (First, Middle, Last)

MEHER NIGAR SARKAR

Former Name / Maiden Name (if Applicable)

NIGAR

Father's Name **MD SOLAIMAN**

Date of Birth (DD/MM/YY) **30/04/1994**

Gender

☐ Male
☒ Female

Social Security Number (if applicable)

Nationality

INDIAN

Marital Status

UNMARRIED

Current Address

Period of stay

Contact Details for Verification

Door No / Plot No **408**
Premises Name **PRABHAVATI MEGHANA**
Floor **5TH**
Corss / Main / Street **Maruthi Layout**
Village Name **Bengaluru**
Post **Bengaluru**
Taluk
District
State **Karnataka**
Prominent Landmark **D MART HONGESHANDRA**

From (Month/Year)
2020

To (Month/Year)
PRESENT

8240006240

Residence Landline Number

Mobile number
8240014033

Permanent Address

Period of stay

Contact Details for Verification

Door No / Plot No
Premises Name **DR RAFIUL IMAD FINAN**
Floor
Corss / Main / Street
Village Name **KUMARDANGI**
Post **RAIGANJ**
Taluk
District **UTTAR DINAJPUR**
State **WEST BENGAL**
Prominent Landmark **RAIGANJ MUNICIPALITY**

From (Month/Year)
1989

To (Month/Year)
PRESENT

Residence Landline Number

Mobile number
8240014033

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 FUTURE INSTITUTE OF ENGINEERING AND MANAGEMENT COLLAGE Address: Sonarpur Station Rd, Mission Pally, Narendrapur, Kolkata, West Bengal 700150	maulana abul kalam azad university of technology Address: BF Block, Sector 1, Bidhannagar, Kolkata, West Bengal 700064	dd/mm/yy 13/10/20 14	dd/mm/yy 30/05/20 17	<input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Part Time	14801014020

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

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

College Name & Address	University Name & Address	Dates Attended		Qualification Gained	ID /Roll No
		From	To		
4		dd/mm/yy	dd/mm/yy	<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} DIGIT GENERAL INSURANCE COMPANY			Address of Current Employer Atlantis, 95, 4th B Cross Road, Koramangala Industrial Layout, 5th Block, Bengaluru, Karnataka 560095		
Telephone No	Employee Code/No 1307		Designation TALESALES EXECUTIVE	Department DIRECT SALES	
Employment Period		Manager's Name KAVULURI NITIN V	Manager's Contact No 9987725117	Can a reference taken now? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
From 13/05/2019	To 29/10/2020		Manager's Email ID V.KAVULURINITIN@GODIGIT.COM		
Duties & Responsibilities MANAGING DIRECT SALES			Reasons for leaving FAMILY PROBLEM		
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 checked="" type="checkbox"/> Relieving letter <input checked="" type="checkbox"/> Offer letter <input type="checkbox"/> Any Other (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 (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: Meher Nigar Sarkar

Name: MEHER NIGAR SARKAR

Date: 19/05/2021

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
HDMPS6478C



नाम / Name

MEHER NIGAR SARKAR

पिता का नाम / Father's Name

MD SOLAIMAN

जन्म की तारीख / Date of Birth

30/04/1994

Meher Nigar Sarkar

हस्ताक्षर / Signature





ভারতীয় বিনিয়োগ পরিচয় প্রাধিকরণ

ভারত সরকার

Unique Identification Authority of India
Government of India

তালিকাভুক্তির আই ডি / Enrollment No.: 1062/04093/30602

To
মেহের নিগার সরকার
MEHER NIGAR SARKAR
--
KUMARDANGI SHREEPALY
Raiganj
Raiganj
Raiganj Uttar Dinajpur
West Bengal 733134
8927731375

08/07/2015

271886935



MP718869357FT



আপনার আধার সংখ্যা / Your Aadhaar No. :

9919 1212 3620

আধার - সাধারণ মানুষের অধিকার



ভারত সরকার

Government of India



মেহের নিগার সরকার
MEHER NIGAR SARKAR
পিতা : মহ.সোলাইমান
Father : Md.Solaiman
জন্মতারিখ / DOB : 30/04/1994
মহিলা / Female



9919 1212 3620

আধার - সাধারণ মানুষের অধিকার