

EMPLOYEE BACKGROUND VERIFICATION FORM

COMPANY FULL NAME : WORTGAGE FINANCE 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
Credit Officer	Bengaluru

Personal Information

Full Name (First, Middle, Last)	Sunil G A	Former Name / Maiden Name (if Applicable)	
Father's Name	Arun G H	Date of Birth (DD/MM/YY)	31-01-1995
Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	Social Security Number (if applicable)	Nationality Indian	Marital Status Unmarried

Current Address	Period of stay	Contact Details for Verification
Door No / Plot No	26	8553770866
Premises Name	From (Month/Year)	Residence Landline Number
Floor	Jan-95	
Corss / Main / Street		
Village Name		
Post	To (Month/Year)	Mobile number
Taluk	May-21	8553770866
District		
State		
Prominent Landmark		

Permanent Address	Period of stay	Contact Details for Verification
Door No / Plot No	26	8553770866
Premises Name	From (Month/Year)	Residence Landline Number
Floor	Jan-95	
Corss / Main / Street		
Village Name		
Post	To (Month/Year)	Mobile number
Taluk	May-21	8553770866
District		
State		

Prominent Landmark	GT Mall				
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 DON BOSCO INSTITUTE OF TECHNOL OGY SH17, Kumbalgod u, Karnataka 560074	Visvesvara ya Technologi cal University (VTU) Public university in Belgaum, Karnataka	01-07-2015	01-07-2017	Full Time <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	1DB15MBA39

				<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	
<p>Please tick mark the documents submitted for this qualification along with this form</p> <p> <input type="checkbox"/> Marksheet <input type="checkbox"/> Provisional Certificate <input type="checkbox"/> Degree Certificate <input type="checkbox"/> None </p> <p> Marksheet Degree Certificate </p>					

Previous Employment History - Please attach a copy of your relieving letter/service certificate					
Name of Current Employer - 1 {Last Company}			Address of Current Employer		
INDIABULLS CONSUMER FINANCE LIMITED			Plot No 87, 6, Richmond Rd, Richmond Town, Bengaluru, Karnataka 560025		
Telephone No		Employee Code/No		Designation	
		222788		Credit Manager	
				Department	
				Personal Loan - Credit	
Employment Period		Manager's Name		Manager's Contact No	
From	To			9590667888	
October 31st 2017	January 16th 2018	S K Naveen Kumar		Manager's Email ID	
				not aware	
				<input type="checkbox"/> Yes <input type="checkbox"/> No Yes	
Duties & Responsibilities			Reasons for leaving		
Assessing credit worthiness of customer			Career growth		
First Salary drawn		Was this Position		Agency Details (if temporary or contractual), provide details	
Nov-17	30,000	<input type="checkbox"/> Permanent <input checked="" type="checkbox"/> Permanent			
Last Salary drawn		<input type="checkbox"/> Temporary <input type="checkbox"/> Contractual			
Nov-19	28,650				
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 <u>Experience Letter</u>					
<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		

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)				
<u>Education:</u> <ul style="list-style-type: none"> ● Photocopy of degree certificate and final mark sheet of all examinations 				
<u>Employment</u> <ul style="list-style-type: none"> ● Photocopy of relieving / experience letter for each employer mentioned in the form 				
<u>Government Identity or Address Proof</u> <ul style="list-style-type: none"> ● Passport Copy / Driving License / Voter ID / Aadhaar Card / Bank Passbook 				
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				

information relevant to this enquiry to disclose it to Soliquist Global IT 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: Sunil G A

Name: Sunil G A

Date: 10-05-2021



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ಭಾರತ ಸರ್ಕಾರ

Unique Identification Authority of India
Government of India

ಭರ್ತಿ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrolment No.: 1096/01229/08597

To: Sunil G A
(ಸುನಿಲ್ ಜಿ ಎ)
S/O Arun G H
76
1st Cross
Choluru Palya
Bangalore
Bangalore
Karnataka - 560023
Mobile :

Date: 06/12/2011

Ref. No : 00000441-00145482-00120544-Magadi Road



UA 08806696 2 IN

ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

3844 3852 7950

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ

GOVERNMENT OF INDIA

ಸುನಿಲ್ ಜಿ ಎ
Sunil G A
ಹುಟ್ಟಿದ ವರ್ಷ / Year of Birth : 1995
ಪುರುಷ / Male

3844 3852 7950



ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



Date: March 03, 2020

Ref No: SFSL/2020/EL/00146315

Employee Code: 00222788

To Whom So Ever It May Concern

This is to certify that Mr. Sunil G A has worked with our organization from October 31, 2017 to January 16, 2020.

At the time of separation he was designated as Credit Manager in the CREDIT PL Department.

During his tenure, the services were found to be satisfactory. He has worked with a great sense of ownership and commitment.

We hope, he would carry on the same work culture and etiquette wherever he goes and wish him the very best for his future endeavors.

Sincerely,

For Indiabulls Consumer Finance Ltd

A handwritten signature in black ink, appearing to read "Jiohan", with a horizontal line extending from the end.

Authorized Signatory
Human Resources

IB Consumer Finance Ltd
CIN: U74899DL1994PTC062407

Corporate Office : Indiabulls House, 448-451, Udyog Vihar, Phase-V, Gurugram-122016
Reg Office : M - 62 & 63 First Floor, Connaught Place New Delhi 01 Tel. +91 11 3025 2900 Fax. +91 113025 2901
Website: www.indiabulls.com, E-mail: helpdesk@indiabulls.com

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
HKLPS8488E



नाम / Name
SUNIL G A

पिता का नाम / Father's Name
GUJARATHI HANUMANTHUSA ARUN

जन्म की तारीख / Date of Birth
31/01/1995

Sunil G.A

हस्ताक्षर / Signature

