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| **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** | | | | | | | |
| SENIOR DEVELOPER | | | | | CHENNAI | | |
|  | | | | | | | |
| **Personal Information** | | | | | | | |
| Full Name (First, Middle, Last)  NIVASMARAN M | | | | Former Name / Maiden Name (if Applicable) | | | |
| Father's Name  MANIMARAN. K | | | | Date of Birth (DD/MM/YY) 25/07/89 | | | |
| Gender | Social Security Number (if applicable) | | | Nationality  INDIAN | | Marital Status  MARRIED | |
| **Male** |
| Female |
| **Current Address** | | | **Period of stay**  **30 YEARS** | | | **Contact Details for Verification**  **8838628491** | |
| Door No / Plot No | 2/58 | |
| Premises Name | USHADEVI ILLAM | | **From (Month/Year)**  **07/89** | | | **Residence Landline Number** | |
| Floor | GROUND | |
| Corss / Main / Street | UDHAYASOORIYAN STREET | |
| Village Name | ARUPATHY | |
| Post | ARUPATHY | | **To (Month/Year)**  **AT PRESENT** | | | **Mobile number**  **8838628491** | |
| Taluk | THRANGAMBADI | |
| District | NAGAPATTINAM | |
| State | TAMILNADU | |
| Prominent Landmark |  | |
|  | | | | | | | |
| **Permanent Address** | | | **Period of stay**  **30 YEARS** | | | **Contact Details for Verification**    **8838628491** | |
| Door No / Plot No | 2/58 | |
| Premises Name | USHADEVI ILLAM | | **From (Month/Year)**  **07/89** | | | **Residence Landline Number** | |
| Floor | GROUND | |
| Corss / Main / Street | UDHAYASOORIYAN STREET | |
| Village Name | ARUPATHY | |
| Post | ARUPATHY | | **To (Month/Year)**  **AT PRESENT** | | | **Mobile number**  **8838628491** | |
| Taluk | THRANGAMBADI | |
| District | NAGAPATTINAM | |
| State | TAMILNADU | |
| Prominent Landmark |  | |
|  | | | | | | | |
| **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 AVC COLLEGE OF ENGINNEERING, MANNAMPANDAL. | | ANNA UNIVERSITY, CHENNAI | | 17/08/06 | 05/05/10 | FULL TIME  Full Time Part Time | REGNO: 80106205027  ROLL NO: 06IT27 |

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| **College Name & Address** | **University Name & Address** | **Dates Attended** | | **Qualification Gained** | **ID /Roll No** |
| **From** | **To** |
| 2 |  | dd/mm/yy | dd/mm/yy | Full Time Part Time |  |
|  | | | | | |
| **College Name & Address** | **University Name & Address** | **Dates Attended** | | **Qualification Gained** | **ID /Roll No** |
| **From** | **To** |
| 3 |  | dd/mm/yy | dd/mm/yy | Full Time Part Time |  |
|  | | | | | |
| **College Name & Address** | **University Name & Address** | **Dates Attended** | | **Qualification Gained** | **ID /Roll No** |
| **From** | **To** |
| 4 |  | dd/mm/yy | dd/mm/yy | Full Time Part Time |  |
| Please tick mark the documents submitted for this qualification along with this form  **Marksheet** Provisional Certificate **Degree Certificate** None | | | | | |

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| **Previous Employment History - Please attach a copy of your relieving letter/service certificate** | | | | | | | | | |
| Name of Current Employer - 1 {Last Company}  LAMINAAR AVIATION INFOTECH | | | | | Address of Current Employer  ANJANEYA TECHNO PARK, 147,HAL AIRPORT ROAD, KODIHALLI, BENGALURU, KARNATAKA. PIN: 560008 | | | | |
| Telephone No  80 6718 8383 | | Employee Code/No  9198 | | | Designation  SENIOR SOFTWARE ENGINEER | | | Department  SWD-FPDS | |
| Employment Period | | | Manager's Name  KAVITHA GIRISH | | | Manager's Contact No  7022457425 | | | Can a reference taken now?  **Yes** No |
| From  02-04-2014 | To  07-05-2021 | |
| Manager's Email ID  Kavitha.girish@laminaar.in | | |
| Duties & Responsibilities  TEAM MANAGEMENT, SOFTWARE DEVELOPMENT | | | | | | Reasons for leaving  CAREER GROWTH | | | |
| First Salary drawn  17000 /- | | | Was this Position | | Agency Details (if temporary or contractual), provide details | | | | |
| **Permanent** | |
| Last Salary drawn  74000 /- | | | Temporary | |
| Contractual | |
| Please tick mark the documents submitted for this employment | | | | | | | | | |
| Service Certificate | |  | Relieving letter | | Offer letter | | **Any Other** | |  |
| None |  |  |  |  |  |  | (please sp | ecify) | APPOINTMENT LETTER |
|  | | | | | | | | | |
| **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)  OOMSYS TECHNOLOGIES | | | | | Address of Employer  42/81, TTK ROAD, CIT COLONY, ALWARPET, CHENNAI, TAMILNADU. PIN: 600018. | | | | |
| Telephone No  9941909070 | | Employee Code/No | | | Designation  PROGRAMMER | | | Department  SOFTWARE DEVELOPMENT | |
| Employment Period | | | | Manager's Name  SHOBANA. U | | | Manager's Contact No: 9941909070 | | |
| From  18-07-2011 | | To  20-MAR-2014 | |
| Manager's Email ID: [hr@oomsys.com](mailto:hr@oomsys.com) (or) shobana.u@oomsys.com | | |
| Duties & Responsibilities  Requirement gathering, development and unit testing | | | | | | Reasons for leaving  CARREER GROWTH | | | |
| First Salary drawn  4000 /- | | | Was this Position | | Agency Details (if temporary or contractual), provide details | | | | |
| **Permanent** | |
| Last Salary drawn  12000 /- | | | Temporary | |
| Contractual | |
| Please tick mark the documents submitted for this employment | | | | | | | | | |
| Service Certificate | |  | **Relieving letter** | | Offer letter | | **Any Other** | |  |
| None |  |  |  |  |  |  | (please sp | ecify) | APPOINTMENT LETTER |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **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 | | Agency Details (if temporary or contractual), provide details | | | |
| Permanent | |
| Last Salary drawn | | Temporary | |
| Contractual | |
| Please tick mark the documents submitted for this employment | | | | | | | |
| Service Certificate |  | Relieving let | ter | Offer letter |  | Any Oth | er |
| None |  |  |  |  |  | (please sp | ecify) |
|  | | | | | | | |
| **Documents Required (Mandatory)** | | | | | | | |
| Education: | | | | | | | |
| Photocopy of degree certificate and final mark sheet of all examinations  Employment    Photocopy of relieving / experience letter for each employer metioned in the form  Government Identity or Address Proof    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 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: Date: | | | | | | | |
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