|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **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)  KARTHIKEYAN R | | | | Former Name / Maiden Name (if Applicable) | | | |
| Father's Name  RAVICHANDRAN P | | | | Date of Birth (DD/MM/YY)  25/07/92 | | | |
| Gender | Social Security Number (if applicable) | | | Nationality  INDIAN | | Marital Status  UNMARRIED | |
| **Male** |
| Female |
| **Current Address** | | | **Period of stay**  **4 MONTHS** | | | **Contact Details for Verification**  **SIVANANTHAM(FRIEND) - 9095969024** | |
| Door No / Plot No | 4/8 | |
| Premises Name |  | | **From (Month/Year)**  **JAN -2021** | | | **Residence Landline Number** | |
| Floor |  | |
| Corss / Main / Street | ROYALA NAGAR 1ST MAIN ROAD | |
| Village Name | RAMAPURAM | |
| Post | PORUR | | **To (Month/Year)**  **MAY 2021** | | | **Mobile number**  **9865952558** | |
| Taluk |  | |
| District | CHENNAI | |
| State | TAMILNADU | |
| Prominent Landmark | BACK SIDE OF MIOT HOSPITAL | |
|  | | | | | | | |
| **Permanent Address** | | | **Period of stay**  **15 YEARS** | | | **Contact Details for Verification**  **RAVICHANDRAN(FATHER)-9443775256** | |
| Door No / Plot No | 13 E /4356A | |
| Premises Name |  | | **From (Month/Year)**  **JAN 2006** | | | **Residence Landline Number** | |
| Floor |  | |
| Corss / Main / Street | CHAKRAVARTHI NAGAR, ALAGAR NAGAR EXTN | |
| Village Name |  | |
| Post |  | | **To (Month/Year)**  **MAY 2021** | | | **Mobile number**  **9865952558** | |
| Taluk |  | |
| District | PUDUKKOTTAI | |
| 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 ANNA UNIVERSITY, TRICHY | | ANNA UNIVERSITY, CHENNAI | | 04/06/12 | 08/05/15 | |  | | --- | |  | |  |   **Full Time** Part Time | 810012621017 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **College Name & Address** | **University Name & Address** | **Dates Attended** | | **Qualification Gained** | **ID /Roll No** |
| **From** | **To** |
| 2 H.H THE RAJAH’S COLLEGE, PUDUKKOTTAI | BHARATHIDASAN UNIVERSITY, TRICHY | 01/06/09 | 04/05/12 | **Full Time** Part Time | 09CAA5983 |
|  | | | | | |
| **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 | | | | | |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Previous Employment History - Please attach a copy of your relieving letter/service certificate** | | | | | | | | | |
| Name of Current Employer - 1 {Last Company}  LIONBRIDGE TECHNOLOGY | | | | | Address of Current Employer  51, Ratha Tek Meadows Rd, Kovur, Elcot Sez, Sholinganallur, Chennai, Tamil Nadu 600119 | | | | |
| Telephone No  044 6678 5000 | | Employee Code/No  E08197 | | | Designation  SOFTWARE ENGINEER | | | Department  SOFTWARE DEVELOPMENT | |
| Employment Period | | | Manager's Name  ANANTHA | | | Manager's Contact No  7904785893 | | | Can a reference taken now?  **Yes** No |
| From  19-SEP-2019 | To  30-Apr-2021 | |
| Manager's Email ID  anantha.d@lionbridge.com | | |
| Duties & Responsibilities  Software development and unit test case written and interaction with client | | | | | | Reasons for leaving  FOR CARRER GROWTH AND IMPROVE SKILLS | | | |
| First Salary drawn  5 LPA | | | Was this Position | | Agency Details (if temporary or contractual), provide details | | | | |
| **Permanent** | |
| Last Salary drawn  5 LPA | | | Temporary | |
| Contractual | |
| Please tick mark the documents submitted for this employment | | | | | | | | | |
| Service Certificate | |  | **Relieving letter** | | Offer letter | | Any Other | |  |
| None |  |  |  |  |  |  | (please sp | ecify) |  |
|  | | | | | | | | | |
| **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)  CADS SOFTWARE INDIA PVT LTD. | | | | | Address of Employer  Type 2/5, DR.VSI ESTATE, RAJEEV GANDHI SALAI, THIRUVANMIYUR, THARAMANI, CHENNAI- 600041 | | | | |
| Telephone No  044 2254 2114 | | Employee Code/No  2058 | | | Designation  SOFTWARE ENGINEER | | | Department  SOFTWARE DEVELOPMENT | |
| Employment Period | | | | Manager's Name  SHANMUGASUNDARAM | | | Manager's Contact No  9994158413 | | |
| From  1-APR-2018 | | To  18-SEP-2019 | |
| Manager's Email ID  Shanmugasundaram.sarguru@cadsglobal.com | | |
| Duties & Responsibilities  SOFTWARE DEVELOPMENT | | | | | | Reasons for leaving  THEY DEVELOPING ADD ONS/SOFTWARE PLUGIN, FOR BE A PART OF ENTIRE SOFTWARE DELOPMENT I SWITCHED. | | | |
| First Salary drawn  3 LPA | | | Was this Position | | Agency Details (if temporary or contractual), provide details | | | | |
| **Permanent** | |
| Last Salary drawn  3.6 LPA | | | Temporary | |
| Contractual | |
| Please tick mark the documents submitted for this employment | | | | | | | | | |
| Service Certificate | |  | **Relieving letter** | | Offer letter | | Any Other | |  |
| None |  |  |  |  |  |  | (please sp | ecify) |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Previous Employment History -** Please attach a copy of your relieving letter/service certificate | | | | | | | |
| Name of Employer (3)  DATAMATICS GLOBAL SERVICE LIMITED | | | | Address of Employer  RR TOWER-PHASE 3, 3RD FLOOR, THIRU VI KA INDUSTRIAL ESTATE, GUINDY, CHENNAI-600032 | | | |
| Telephone No  044 6608 3700 | Employee Code/No  32854 | | | Designation  TRAINEE CONSULTANT | | | Department  CLAIMS MANAGEMENT |
| Employment Period | | | Manager's Name  RAVI | | | Manager's Contact No  8056161567 | |
| From  15-MAY-2017 | To  30-MAR-2018 | |
| Manager's Email ID | |
| Duties & Responsibilities  SOFTWARE DEVELOPMENT ANS SUPPORT | | | | | Reasons for leaving  60% OF DEVELOPMENT AND 40% OF SUPPORT, FOR FULL SOFTWARE DEVELOPMENT I LEAVE. | | |
| First Salary drawn  2.1 LPA | | Was this Position | | Agency Details (if temporary or contractual), provide details | | | |
| **Permanent** | |
| Last Salary drawn  2.1 LPA | | 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: KARTHIKEYAN R Date: | | | | | | | |
|  | | | | | | |  |