## How to fill Letter of Authorisation...

I hereby confirm that I am currently employed with	
NA	(current Company Name ) only in the capacity of
NA(designate	ation) having employee code <mark>NA</mark> at
NA (Location). I	hereby also confirm that I am not engaged directly or Indirectly
with any other job/profession/business of any nature as an employee, contractor, sub-contractor,	
direct/indirect consultant, director, partner, or freelancer or in any other manner currently. I hereby	
agree and share my consent and authorization to Birlasoft to conduct any verification on the	
information and documents provided by me directly to Birlasoft or through any agencies authorized	
by it. I unconditionally release and hold harmless any individual, corporation, or private or public	
entity from all causes of action that might arise from furnishing to Birlasoft and the outside agency	
information that they may request and require pursuant to this release. This authorization and	
release, in original, faxed, electronically sent/accepted or photocopied form, shall be valid for this and	
any future reports and updates that may be requested and will be retained by the company till the	
purpose is resolved.	
Signed:	
Name in Block Capitals:	Name in Capital Letters
Date of Birth:	<mark>Your DOB</mark>
(MM/DD/YYYY)	
Date:	Date of Filling Form
(MM/DD/YYYY)	