**Background Verification Form**

Thank you for the interest shown in Virtusa. Please take a few minutes of your time to fill in the following details to help us understand your technical skills and personal competencies better.

**Please keep in mind the following when filling up the form:**

Paste your Passport Size Photograph

1. Fill in the boxes in the application blank in bold capital

letters unless the content is of a descriptive nature.

1. Fill in the details according to the format mentioned

for the date andday.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NAME (As in Passport/ Govt ID) | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Avinash\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_Kumar\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Given Name Surname | | | |
| 1. Former Name (s) / Maiden Name (if applicable) - 2. Names & Previous Names Used in the last 7 years - | | | | | |
| Father’s Name: | | | Ashok Kumar Singh | | |
| Nationality: | | | Indian | | |
| Sex: Male | | | Marital Status: Married | | |
| Date of Birth: \_\_\_\_\_\_\_\_\_\_13\_/\_\_\_03\_\_\_\_\_\_\_/\_\_\_\_\_1995\_\_\_\_\_\_\_  DD MM YY | | | | Place of Birth (City): Samastipur  Country of Birth: India | |
| ADDRESS | Present Address | | | | Permanent Address |
| House No | Kusum Kutir | | | | Kusum Kutir |
| Locality / City | Rosera, Samatipur | | | | Rosera, Samatipur |
| State | Bihar | | | | Bihar |
| PIN CODE | 848210 | | | | 848210 |
| Period of Stay | 23 Years | | | | 23 Years |
|  (Telephone) |  | | | |  |
|  (Mobile Phone) | 9074096349 | | | |  |
| E-mail ID (Personal) | avinashkrsingh.cse@gmail.com | | | | 2 |
| Instant Messaging System ID: | | | | | |

|  |  |  |
| --- | --- | --- |
| **Passport No.** | **PAN No.** | SSN No. If any (Mandatory if studied in USA or Canada) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Address History (List most recent first) - Please provide addresses for the last 7 years** | | | | |
| Period of Stay  (MM/YYYY) | Complete Address along with Landmark | Country | Zip code | Contact Number with Relation ship |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Family Information (Parents, Brothers, Sisters, Spouse & Children)** | | | | |
| S.No | Name | Relationship | Date of Birth | Age |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EDUCATION INFORMATION** | | | | | | | | | |
| **Degree** | **Course** | **Program (full-time/Part-time)** | **Elective** | **College Name and Address** | **University Name and Address** | **Duration** | | **HOD Contact Details** | **Graduation Date (MM/YY)** |
| X |  |  |  |  |  | From | To |  |  |
| XII |  |  |  |  |  |  |  |  |  |
| Graduation |  |  |  |  |  |  |  |  |  |
| PG |  |  |  |  |  |  |  |  |  |
| Others 1 |  |  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Details of Previous Employers (Starting from your Current Job, covering up to Last 5 Years of employments)Please attach a copy of your relieving letter/service certificate for this | | | |
| Company Name (1) : | | Last Designation held: | |
| Address (main office and branch where worked): | | **Company TAN Number:**  **UAN number :**  **EPFO number :** | |
| Employment Period: (date, month, year)  From To | Employee Code/ Personnel No: | | Name of Reporting Manager |
| Name of HR: | Contact No. of HR: | | Email Id of HR: |
| Designation & Department of Reporting Manager | Contact No of Reporting Manager: | | Email ID of Reporting Manager: |
| Name of Alternative Reporting Manager  Designation & Department of Alternative Reporting Manager | Contact No of Alternative Reporting Manager:  Email ID of Alternative Reporting Manager: | | |
| Whether employment is of permanent or temporary nature -  Permanent  Temporary | | | |
| Agency Details (if temporary or contractual) | | | |
| Remunerations (CTC pa) | Reason(s) for Leaving | | |
| Details of Previous Employers (Starting from your Current Job, covering up to Last 5 Years of employments)Please attach a copy of your relieving letter/service certificate for this | | | |
| Company Name (2) : | | Last Designation held: | |
| Address (main office and branch where worked): | | **Company TAN Number:**  **UAN number :**  **EPFO number :** | |
| Employment Period: (date, month, year)  From To | Employee Code/ Personnel No: | | Name of Reporting Manager |
| Name of HR: | Contact No. of HR: | | Email Id of HR: |
| Designation & Department of Reporting Manager | Contact No of Reporting Manager: | | Email ID of Reporting Manager: |
| Name of Alternative Reporting Manager  Designation & Department of Alternative Reporting Manager | Contact No of Alternative Reporting Manager:  Email ID of Alternative Reporting Manager: | | |
| Whether employment is of permanent or temporary nature -  Permanent  Temporary | | | |
| Agency Details (if temporary or contractual) | | | |
| Remunerations (CTC pa) | Reason(s) for Leaving | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Details of Previous Employers (Starting from your Current Job, covering up to Last 5 Years of employments)Please attach a copy of your relieving letter/service certificate for this | | | |
| Company Name (3) : | | Last Designation held: | |
| Address (main office and branch where worked): | | **Company TAN Number:**  **UAN number :**  **EPFO number :** | |
| Employment Period: (date, month, year)  From To | Employee Code/ Personnel No: | | Name of Reporting Manager |
| Name of HR: | Contact No. of HR: | | Email Id of HR: |
| Designation & Department of Reporting Manager | Contact No of Reporting Manager: | | Email ID of Reporting Manager: |
| Name of Alternative Reporting Manager  Designation & Department of Alternative Reporting Manager | Contact No of Alternative Reporting Manager:  Email ID of Alternative Reporting Manager: | | |
| Whether employment is of permanent or temporary nature -  Permanent  Temporary | | | |
| Agency Details (if temporary or contractual) | | | |
| Remunerations (CTC pa) | Reason(s) for Leaving | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Details of Previous Employers (Starting from your Current Job, covering up to Last 5 Years of employments)Please attach a copy of your relieving letter/service certificate for this | | | |
| Company Name (4) : | | Last Designation held: | |
| Address (main office and branch where worked): | | **Company TAN Number:**  **UAN number :**  **EPFO number :** | |
| Employment Period: (date, month, year)  From To | Employee Code/ Personnel No: | | Name of Reporting Manager |
| Name of HR: | Contact No. of HR: | | Email Id of HR: |
| Designation & Department of Reporting Manager | Contact No of Reporting Manager: | | Email ID of Reporting Manager: |
| Name of Alternative Reporting Manager  Designation & Department of Alternative Reporting Manager | Contact No of Alternative Reporting Manager:  Email ID of Alternative Reporting Manager: | | |
| Whether employment is of permanent or temporary nature -  Permanent  Temporary | | | |
| Agency Details (if temporary or contractual) | | | |
| Remunerations (CTC pa) | Reason(s) for Leaving | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Details of Previous Employers (Starting from your Current Job, covering up to Last 5 Years of employments)Please attach a copy of your relieving letter/service certificate for this | | | |
| Company Name (5) : | | Last Designation held: | |
| Address (main office and branch where worked): | | **Company TAN Number:**  **UAN number :**  **EPFO number :** | |
| Employment Period: (date, month, year)  From To | Employee Code/ Personnel No: | | Name of Reporting Manager |
| Name of HR: | Contact No. of HR: | | Email Id of HR: |
| Designation & Department of Reporting Manager | Contact No of Reporting Manager: | | Email ID of Reporting Manager: |
| Name of Alternative Reporting Manager  Designation & Department of Alternative Reporting Manager | Contact No of Alternative Reporting Manager:  Email ID of Alternative Reporting Manager: | | |
| Whether employment is of permanent or temporary nature -  Permanent  Temporary | | | |
| Agency Details (if temporary or contractual) | | | |
| Remunerations (CTC pa) | Reason(s) for Leaving | | |

***3.****Please declare whether there is any gap between education or employments?*

***(Please tick) Yes / No.***

***If Yes, Please declare the details of your residence address for any/and all gaps between education or employment during your tenure.***

|  |  |  |  |
| --- | --- | --- | --- |
| From | To | Reason: | Complete Address and Location |
| From | To | Reason: | Complete Address and Location |
| From | To | Reason: | Complete Address and Location |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **REFEREES - Please give Three reference contacts. Reference should be of reporting manager with whom the you had worked in the past 6 months of your last employment. Reference should not be of same level/ designation/ friends and other family members.** | | | | |
| Name **& Designation** | Current Company | Official Mail ID | Contact Details | No of Mths /  Yrs Of Acquaintance |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

*4. Please declare whether you have directorship in any company?*

***(Please tick) Yes / No.***

***If Yes, please provide the details. (\*) Fields are mandatory***

|  |  |  |  |
| --- | --- | --- | --- |
| **Directorship Details (If applicable)** | | | |
| \*Company Name |  | | |
| Company Status |  | Company/Operation Closed  Functional  Re-Located  Merged with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Company also Known as |  | | |
| \*Complete Company Address with Landmark (Where Candidate has worked) |  | | |
| \*Company Contact Number |  | | |
| \*City |  | | \*State |
| \*Date of Joining (DD/MMM/YY) |  | | |
| \*Date of Exit (DD/MMM/YY) |  | | |
| Reason for Leaving |  | | |
| DIN Number |  | | |
| \*Documents Submitted |  | | |

*5. Please declare whether you are involved in Civil/ Criminal Cases against you in the past/ currently whether the case was disposed, withdrawn or currently pending for the court judgement or waiting for the next hearing ?*

***(Please tick) Yes / No.***

***If Yes, please provide the details in the space given below.***

|  |
| --- |
|  |

**Declaration and Authorization**

I understand that any employment by Virtusa India Private Limited or its affiliated companies is conditioned upon positive responses from my references, bonding eligibility, continued adherence to Virtusa India Private Limited policies and procedures, applicable rules and regulations and job performance satisfactory at all times to Virtusa India Private Limited.

I consent to take any pre or post-employment examinations as may be required by Virtusa India Private Limited or its permitted agents, its representative, and release Virtusa India Private Limited and its agents from any liability that may arise from such examination.

I authorize an inquiry to be made on the information contained on this application. Former employers and officials of education institutes, named on this application are authorized to give information about me and I release them from all liability for issuing such information.

I hereby attest and warrant that all my answers on this application as well as on all forms completed in conjunction with my employment are true and accurate. I understand that my misrepresentation of facts, failure to disclose information required on this application or material change in my information provided which is not reported to Human Resources shall be cause for dismissal regardless of when discovered by Virtusa India Private Limited

I understand, and authorize, that Virtusa may share my consumer report and/or investigative report with third parties including auditors, government agencies, and clients as necessary.

I hereby declare that the information given by me is true and the certificates or documents submitted are genuine to the best of my knowledge.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name in Block Capitals: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_