



The Apollo Group

APPLICATION FOR EMPLOYMENT



USING LEGIBLE PRINT, PLEASE COMPLETE THIS FORM IN ITS ENTIRETY

1. Personal Information

Last Name:	NAIK	Middle Name(s):		
First Name:	BHUMI	Birth Place (city):	LUCKNOW	
Date of Birth (mm/dd/yyyy):	05/15/1997	Nationality:	INDIAN	
Country of Birth:	INDIA	Hair Color:	BLACK	
Gender:	<input type="checkbox"/> Male	<input checked="" type="checkbox"/> Female	Height:	5 feet 00 inches or _____ cm
Weight:	lbs.	or	48 kgs.	
Do you have Tattoos?	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	Are the tattoos visible when wearing short-sleeved shirts, shorts or skirts? <input type="checkbox"/> No <input type="checkbox"/> Yes	

2. Contact Information

Permanent Address

Street 1:	ADARSH NAGAR	Street 2:	HABIRPUR NILMATHA CANTT
City:	LUCKNOW	State/Province:	UTTAR PRADESH
Zip/Postal Code:	226002	Country:	INDIA

Phone Numbers (include country codes and area codes) and E-mail

Home Phone:	+91 8146733870	Mobile Phone:	+91 8795110007
E-mail Address:	bhumiinaik56@gmail.com		

3. Dependant Information

Marital Status:	<input checked="" type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed	<input type="checkbox"/> Other
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Number of children under 18 years of age?

Emergency Contact Information

In the event of an emergency, I would like the company to contact the following person or persons:

Person 1	Relationship: SISTER
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Last Name:	CHANDRA	Middle Name(s):	
First Name:	SIMRAN	Mobile Phone:	8931054133
Home Phone:		E-mail Address:	Simran123kumari123@gmail.com

Person 2	Relationship: FRIEND
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Last Name:	ABROL	Middle Name(s):	
First Name:	MARSHAL	Mobile Phone:	9450119900
Home Phone:		E-mail Address:	marshalabrol17@gmail.com

4. Position Desired				
Position Desired: MANAGEMENT TRAINEE	Salary Desired (USD):			
Have you worked on cruise ships before: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, list last company:			
5. Documentation Information				
Passport Information				
Passport Number: T1806365	Passport Nationality: INDIAN			
Date of Issue (mm/dd/yyyy): 10/07/2019	Place of Issue: LUCKNOW			
Date of Expiration (mm/dd/yyyy): 09/07/2029				
Crew Visas				
Type:	Yes/No	Date of Expiration (mm/dd/yyyy):	Visa No:	Type:
C1/D:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
C1:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
D:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Schengen:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other 1:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other 2:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
STCW Certification				
Type:	Yes/No	Date of Expiration (mm/dd/yyyy):	Certificate Number:	
Elementary First Aid (BST)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Fire Prevention & Fire Fighting (BST)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Personal Safety & Social Responsibility (BST)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Personal Survival Techniques (BST)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Crowd Management & Passenger Safety	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Crisis Management & Human Behavior	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Security Awareness	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Seaman's Books				
Type:	Yes/No	Date of Expiration (mm/dd/yyyy):	Number:	Nationality:
National:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Flag State 1:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Flag State 2:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other Certificates				
Type	Yes/No or Not Applicable:	Date of Issue (mm/dd/yyyy):	Date of Expiration (mm/dd/yyyy):	Comments:
Ship's Cook	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Other 1:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			

6. Employment History

List most recent employer first

Employer/Company Name: FIVE HOTELS AND RESORTS Company Phone No: +91 944559988

Position Held: F&B HOSTESS Supervisor Name: NAYAN CHOTALIA

From (mm/dd/yyyy): 02/17/2022 To (mm/dd/yyyy): CURRENTLY WORKING

Starting Salary in USD: 480 USD/- Ending Salary in USD: 480 USD/-

Reason for Leaving: DON'T WANT TO MISS THE OPPORTUNITY FOR THIS POSITION

Employer/Company Name: TELEPERFORMANCE Company Phone No: 1724099900

Position Held: CUSTOMER CARE EXECUTIVE Supervisor Name: ROSHAN KUMAR SHARMA

From (mm/dd/yyyy): 21/05/2021 To (mm/dd/yyyy): 30/01/2022

Starting Salary in USD: 350 USD/- Ending Salary in USD: 350 USD/-

Reason for Leaving: PART TIME JOB

Employer/Company Name: ST. REGIS MUMBAI Company Phone No: 18337020544

Position Held: F&B ASSISTANT Supervisor Name: SIDDHESH SAVASKAR

From (mm/dd/yyyy): 07/01/2019 To (mm/dd/yyyy): 04/31/2021

Starting Salary in USD: USD 220/- Ending Salary in USD: USD 220/-

Reason for Leaving: COVID . 19

7. Education

	School Name and City	No. of Years	From (mm/dd/yyyy):	To (mm/dd/yyyy):	Major/Diploma
High School:	NIOS , NEW DELHI	1	12/10/2013	04/16/2014	MAJOR
College:	TAGORE SR. SECONDARY SCHOOL	1	05/15/2015	05/21/2016	MAJOR
University:	CHITKARA UNIVERSITY	3	07/01/2017	04/21/2019	MAJOR
Apprenticeship:					
Other:					

8. Languages

Language:	Proficiency Level Speak:	Proficiency Level Write:
English (mandatory):	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input checked="" type="checkbox"/> Fluent	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input checked="" type="checkbox"/> Fluent
Spanish:	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
French:	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
German:	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
Other 1 _____:	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
Other 2 _____:	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent

I hereby certify that all information contained in this application form is true and correct, and I understand that any mis-representation or intentional omissions are grounds for denial of hire or reason for dismissal.



Signature of Applicant

05/09/2022

Date (mm/dd/yyyy)

Please do not write in the space below. This section is to be completed by the recruitment agency.

Agency Name:	Location:	
Prescreened: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Prescreener:	Date of Prescreen:
References checked: <input type="checkbox"/> Yes <input type="checkbox"/> No	References checked by:	
Criminal Background Check: <input type="checkbox"/> Yes <input type="checkbox"/> No	Background checked by:	
Applicant has been provided with: <input type="checkbox"/> Job Description <input type="checkbox"/> General BYSS <input type="checkbox"/> Departmental BYSS		

Interview Results:

Apollo Interviewer:
Comments / Observations:

Date:	Division:
Approved Position:	
Approved Salary:	Overall Rating <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
English <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	Tech. Prof. <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
Attitude <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	Grooming <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
Social Skill <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	Energy <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
Org. Fit <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	Confidence <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1

CURRICULUM VITAE



Bhoomi naik

Flat no -- 101 building 24 Street 13 discovery garden UAE

Contact Number +91-8146733870 , +91-8795110007

Email id : bhuminaik56@gmail.com

Area of Interest — F&B Service

EDUCATION:

Qualification/Degree	School/College	University or Board	Year
B. Sc. (H&HA)	Chitkara School of Hospitality, Rajpura, Punjab	NCHMCT NOIDA & IGNOU NEW DELHI	2016-2019
Class XII	Tagore senior secondary school,mayapuri,new Delhi	CBSE	2015-2016
Class X	National institute of open schooling,newdelhi	CBSE	2013-2014

TRAINING& PROJECTS:

Training:

17 weeks Industrial Training from Le Meridien, New Delhi(27 June 2017 — 20 October 2017)

Job Experience:

Currently Working in Five Palm Jumeriah Village as an F&B Hostess From 17 Feb, 2022

Worked in St.Regis Mumbai as an F&B Associate from July 1st, 2019 to 15 April, 2021

Worked at Seven Kitchens for 12 months

Worked at The Sahib Room & Kipling Bar for 6 months

Worked at By The Mekong for 2 months

Skills acquired:

Service

Bar knowledge

Tackle with the guest issues and complaints

Up selling of our product

Cover Set up

Order taking from the guest

Use of Micros

Billing & Settlement

Projects:

Served the esteemed guests who visited the University campus on various occasions
Participated in valedictory function as a dance co-ordinator in the college
Participated in hotel 4th anniversary function as a dance coordinator.

ACHIEVEMENTS:

Received certificate for participation in service and valedictory function
Received appreciation for organizing the theme lunch in the college
Received appreciation for participating in the cultural events of the college
Received appreciation from the guest in guest voice.
Received appreciation from hotel to choreograph dance for Virtual Diwali occasion 2020.

PROFESSIONAL SKILLS:

Good Interpersonal Skills
Team Player/Management
Multi Tasker
Leadership
Adaptable

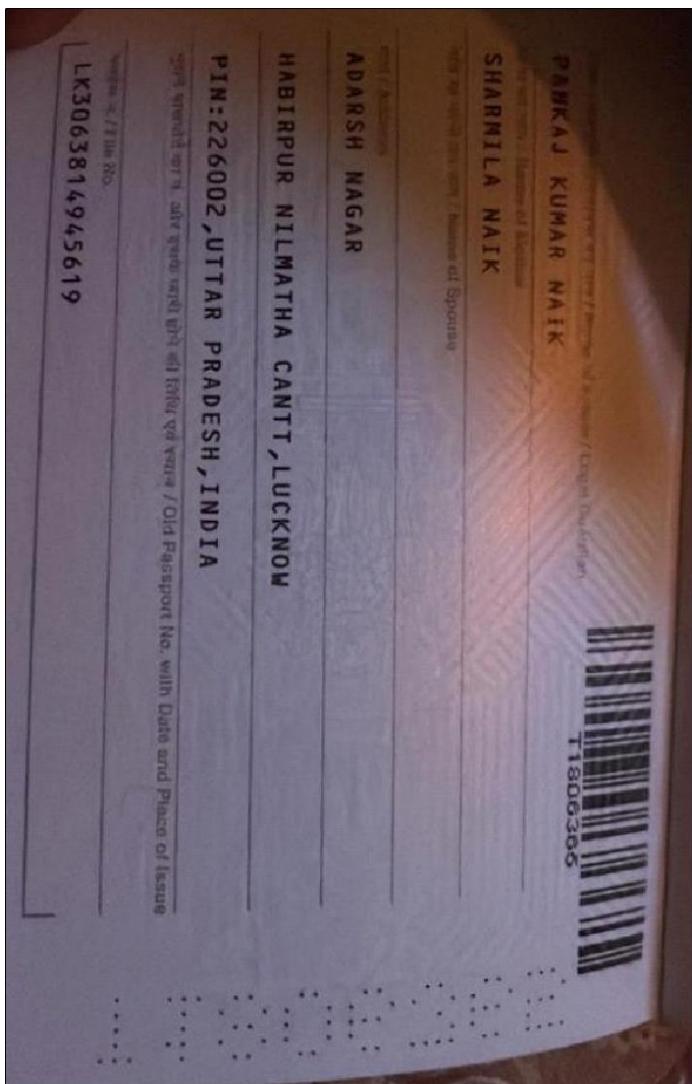
INTEREST & HOBBIES:

Dancing
Calligraphy
Painting/ Drawing

PASSPORT DETAILS

Passport Number: T1806365
Date of Issue : 10/07/2019
Date of Expiry : 09/07/2029
Place of Issue : Lucknow

(BHOOMI NAIK)







Ministry of Health & Family Welfare
Government of India

Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 23417165427

Beneficiary Details

Beneficiary Name / ਲਾਈਪਾਤਰੀ ਦਾ ਨਾਮ	Bhoomi Naik
Age / ਉਮਰ	25
Gender / ਲਿੰਗ	Female
ID Verified / ਸਨਾਤਦ ਦੀ ਕਿਸਮ	Aadhaar # XXXXXXXX8971
Unique Health ID (UHID)	
Beneficiary Reference ID	28496947331413
Vaccination Status / ਟੀਕਾਕਰਣ ਦੀ ਸਥਿਤੀ	Partially Vaccinated (1 Dose)

Vaccination Details

Vaccine Name / ਟੀਕਾ ਦਾ ਨਾਮ	COVISHIELD
Vaccine Type / ਟੀਕੇ ਦੀ ਕਿਸਮ	COVID-19 vaccine, non-replicating viral vector
Manufacturer / ਨਿਰਮਾਤਾ	Serum Institute of India Pvt. Ltd.
Dose Number / ਡੋਜ ਨੰਬਰ	1/2
Date of Dose / ਭਰਾਕ ਦੀ ਮਿਤੀ	24 Jan 2022
Batch Number / ਬੱਚ ਨੰਬਰ	4121AA080M
Next Due Date / ਅਗਲੀ ਮਿਤੀ	Between 18 Apr 2022 and 16 May 2022
Vaccinated By / ਟੀਕਾਕਰਨ ਦੀ ਜ਼ਰੂਰੀ	Mohinder Kaur
Vaccination At / ਟੀਕਾਕਰਨ ਦੀ ਜ਼ਰੂਰੀ	Kharar SDH (Covidshield), SAS Nagar, Punjab

“ਦਵਾਈ ਵੀ ਅਤੇ ਕੜਾਈ ਵੀ।

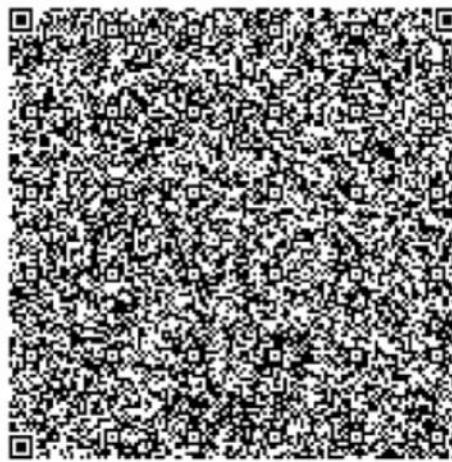
Together, India will defeat
COVID-19”

- ਪ੍ਰਧਾਨ ਮੈਂਤਰੀ

In case of any adverse events, kindly contact the nearest Public Health Center/
Healthcare Worker/District Immunization Officer/State Helpline No. 1075

ਕਿਸੇ ਵੀ ਆਪਾਤਕਾਲੀਨ ਸਹਿਯੋਗ ਵਿਖੇ ਕਿਸੇ ਵੀ ਪਾਛਾਲਕ ਹੋਲਾ ਸੈਟਰ / ਹੋਸਪਿਟ ਕੇਂਦਰ / ਮਿਹਨਤ ਸੁਰੱਖਿਕਾ
ਕਾਨੂੰਨੀ / ਸਿਖਾ ਟੀਕਾਕਰਨ ਅਧਿਕਾਰੀ / ਸਟੇਟ ਹੋਲਪ ਲਾਈਨ ਨੰਬਰ 1075

COWIN
Winning Over COVID



This certificate can be verified by scanning the QR code at
<http://verify.cowin.gov.in>