

# Letter of Authorization

## To Whomsoever It May Concern

If employed by **M/s. Gainsight**, I agree to provide copies of mark sheets and relevant certificates. I understand that employment with **M/s. Gainsight**, is governed by **M/s. Gainsight**, Employment Policies as applicable, including satisfactory information from a background check.

I hereby certify all the statements made on the **M/s. Gainsight**, Employee Application Form are true and complete and I understand that omission or misrepresentation of any fact may result in refusal of employment or immediate dismissal.

As a condition of Company's consideration of my application for employment with the Company, I hereby give my consent to **M/s. Gainsight**, to investigate or cause to be investigated through any third parties my personal, educational, pre or post employment history, criminal, Drug Test, and all other checks relevant to the company. I understand that the background investigation will include, but not be limited to, verification of all information given by me to the Company. I confirm that the Company is entitled to share such investigation report with its clients to the extent necessary in connection with the Services, which I may be required to provide to such clients. I confirm and undertake that the Company shall incur no liability or obligation of any nature whatsoever resulting from such investigation or sharing of the investigation results as above.

**Signature** :   
hajimalung (Feb 15, 2022 12:21 GMT+5.5)

**Name in Capitals** : Hajimalung Baba

**Date** : 15/02/2022