** *SUNDOUS LIMITED***

Recent Photo

**House -04, Road-2/A, Sector-11, Dhaka-1230.**

**Tel: +88-02-8991457,**

**www.sundouslimited.com**

***Employee Information form***

1. Name : …………………………………………………………………..
2. Father's Name : …………………………………………………………………..
3. Mother's Name : ………………………………………………………………….
4. Spouse Name : …………………………………………………………………..
5. Present address : …………………………………………………………………..

…………………………………………………………………..

1. Permanent Address **:** …………………………………………………………………..

…………………………………………………………………..

1. Birth Place : …………………………………………………………………..
2. Religion : …………………………………………………………………..
3. Nationality : …………………………………………………………………..
4. Blood Group : …………………………………………………………………..
5. Marital Status : …………………………………………………………………..
6. Mobile Numbers : …………………………………………………………………..
7. NID Number : …………………………………………………………………..
8. Passport Number : …………………………………………………………………..
9. Driving license Number : …………………………………………………………………..
10. Any ID Number : …………………………………………………………………..
11. E-Mail ID : …………………………………………………………………..
12. Education **:** …………………………………………………………………..

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Examination** | **Group** | **Institute** | **Year** | **GPA/ Division** |
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1. **Guarantor’s/Relative Information :**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Relation** | **Mobile No** | **Occupation** |
|  |  |  |  |
|  |  |  |  |

1. **Experience**  :

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Organization** | **Position** | **Date from** | **Date to** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Referred by (Name & Mob) : …………………………………………………………………..

…………………………………………………………………..

*Declaration:*

*I do hereby declare that, all information presented here are correct & true to the best of my knowledge. If query any documents I will be submitted by appropriate authentic certificates/ papers.*

……………………………………………….

*(Signature with date)*

|  |  |
| --- | --- |
| ***O F F I C E U S E O N L Y*** | |
| *Employee ID NO* |  |
| *Personal File No* |  |
| *Joining Date* |  |
| *Allotted Mobile Number* |  |
| *Salary* |  |
| *Allowance (If any)* |  |
| **Signature of authority**  **(With Seal)** |  |