**Background Verification Form**

Fresher🞏 Laterals 1 🗹 Laterals 2🞏

Robosoft Technologies Pvt. Ltd. Udupi

Instructions: Please fill the form in **BLOCK** letters only and do not use any abbreviations

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Personal Information** | | | | | | | | | | | | | | | | | | | | | |
| **Name (as in the Education Certificate)** | | AYYALA NAGAMANIKANTA | | | | | | | | | | | | | | | | | | | |
| **Nationality** | | INDIAN | | | | | | | | | | | | | | | | | | | |
| **Gender** | | 🗹 Male Female | | | | | | | | | | | | | | | | | | | |
| **Marital Status** | | UNMARRIED | | | | | | | | | | | | | | | | | | | |
| **Contact Number** | | 7013532647 | | | | | | | | | | | | | | | | | | | |
| **Email ID** | | [MANIKANTA7013@GMAIL.COM](mailto:MANIKANTA7013@GMAIL.COM) | | | | | | | | | | | | | | | | | | | |
| **Date of Birth** | | 1 | | 8 | | 0 | | 8 | | 1 | | 9 | | 9 | | 9 | | | | | |
| **Father’s Name** | | **AYYALA NAGESWAR RAO** | | | | | | | | | | | | | | | | | | | |
| **Identification Number** | | **838028873685** | | | | | | | | | | | | | | | | | | | |
| **Identification Type** | | AADHAR CARD NUMBER | | | | | | | | | | | | | | | | | | | |
| **Current Address Details** | | | | | | | | | | | | | | | | | | | | | |
| **House/Flat Number** | | **7/192** | | | | | | | | | | | | | | | | | | | |
| **Building No. & Name** | | **BALIJAPALLI,CHINNAMANDEM** | | | | | | | | | | | | | | | | | | | |
| **Address Line 1** | | **BESIDE POLICESTATION** | | | | | | | | | | | | | | | | | | | |
| **Address Line 2** | | **CHINNAMANDEM** | | | | | | | | | | | | | | | | | | | |
| **Address Line 3** | |  | | | | | | | | | | | | | | | | | | | |
| **City** | | **RAYACHOTI** | | | | | | | | | | | | | | | | | | | |
| **Postal Code** | | **516214** | | | | | | | | | | | | | | | | | | | |
| **State** | | **ANDHRAPRADESH** | | | | | | | | | | | | | | | | | | | |
| **Country** | | **INDIA** | | | | | | | | | | | | | | | | | | | |
| **Prominent Landmark** | | **BESIDE POLICE STATION** | | | | | | | | | | | | | | | | | | | |
| **Period of Stay** | **From** | 1 | 0 | | 0 | | 9 | 2 | 0 | | 2 | | 1 | | **To** | | 0 | 1 | 2 | 3 | Y |
| **Contact Number** | |  | | | | | | | | | | | | | | | | | | | |
| **Permanent Address Details** | | | | | | | | | | | | | | | | | | | | | |
| **Same As Above** | | 🗹  **YES NO** | | | | | | | | | | | | | | | | | | | |
| **House/Flat Number** | |  | | | | | | | | | | | | | | | | | | | |
| **Building No. & Name** | |  | | | | | | | | | | | | | | | | | | | |
| **Address Line 1** | |  | | | | | | | | | | | | | | | | | | | |
| **Address Line 2** | |  | | | | | | | | | | | | | | | | | | | |
| **Address Line 3** | |  | | | | | | | | | | | | | | | | | | | |
| **City** | |  | | | | | | | | | | | | | | | | | | | |
| **Postal Code** | |  | | | | | | | | | | | | | | | | | | | |
| **State** | |  | | | | | | | | | | | | | | | | | | | |
| **Country** | |  | | | | | | | | | | | | | | | | | | | |
| **Prominent Landmark** | |  | | | | | | | | | | | | | | | | | | | |
| **Period of Stay** | **From** | M | M | | D | | D | Y | Y | | Y | | Y | | **To** | | M | M | D | D | Y |
| **Contact Number** | |  | | | | | | | | | | | | | | | | | | | |

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| **Education - Highest Qualification** | | | | | | | | | | | | |
| **Name as appeared in the Certificate** | | | AYYALA NAGAMANIKANTA | | | | | | | | | |
| **Name of Qualification Obtained** | | | B.S.C | | | | | | | | | |
| **Area of Specialization (s)** | | | AGRI | | | | | | | | | |
| **Institution Name and Address**  (School/ College/Institute) | | | BHAGAWANT UNIVERSITY / SIKAR RD AJMER,RAJASTHAN-305004 | | | | | | | | | |
| **Name & Address of University / Board** | | | BHAGWANT UNIVERSITY | | | | | | | | | |
| **Enrolment / Roll / Registration Number** | | | 116150100053 | | | | | | | | | |
| **Contact Person Name - 1 (HOD/Principal)** | | | SANJAYKUMAR MISHRA | | | | | | | | | |
| **Email ID and Contact Number** | | | [UNIBHAGWANT@REDIFFMAIL.COM](mailto:UNIBHAGWANT@REDIFFMAIL.COM) / 9928144442 | | | | | | | | | |
| **Contact Person - 2 (HOD/Principal)** | | | MUKHESH BISHNOI | | | | | | | | | |
| **Email ID and Contact Number** | | | [UNIBHAGWANT@REDIFFMAIL.COM](mailto:UNIBHAGWANT@REDIFFMAIL.COM) / 9928144443 | | | | | | | | | |
| **Period of Study** | | **From** | 0 | 8 | 1 | | 6 | **To** | 3 | 1 | 2 | 0 |
| **Year of Passing** |  | | **Graduated** | | | 🗹 Yes No Pursuing | | | | | | |
| **Course Attended** | | | 🗹 Regular Evening Correspondence | | | | | | | | | |

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| --- |
| **Employment Details** |

**Fresher (Not required to fill this section)** 🗹 **Experienced (Please fill this section as instructed below)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Employer 1** | | | | | | | | | | | | | | | | | | | |
| **Company Name** | **FEEDOOZY TECHNOLOGY PVT LTD** | | | | | | | | | | | | | | | | | | |
| **Address Line 1** | **#28/4 , 4THFLOOR ,ABOVE PRIMA DIAGNOSTIC,** | | | | | | | | | | | | | | | | | | |
| **Address Line 2** | **SIDDHAPURAVILLAGE,WHITEFIELD MAINROAD,VARTHUR ROAD** | | | | | | | | | | | | | | | | | | |
| **Address Line 3** |  | | | | | | | | | | | | | | | | | | |
| **City** | BENGALURU | | | | | | | | | | | | | | | | | | |
| **Postal Code** | 560066 | | | | | | | | | | | | | | | | | | |
| **State** | KARNATAKA | | | | | | | | | | | | | | | | | | |
| **Company Phone No.** | 080-54254854 | | | | | | | **Company Website** | | | | | WWW.FEDOCI.COM | | | | | | |
| **Designation** | FRONTEND DEVELOPER | | | | | | | **Supervisor Name** | | | | | SANGEETHA | | | | | | |
| **Department** | IT | | | | | | | **Supervisor’s Designation** | | | | | HR MANAGER | | | | | | |
| **Remuneration (CTC - PA)** | 4.5 LPA | | | | | | | **Supervisor’s Email ID** | | | | | [sangeetha@fedoci.com](mailto:sangeetha@fedoci.com) / hr @fedoci.com | | | | | | |
| **Employee ID** | FEDO-0364 | | | | | | | **Supervisor’s Phone No.** | | | | | 080-54254854 | | | | | | |
| **Date of Joining** | 1 | 1 | 0 | 2 | 2 | 0 | 2 | | 0 | **Date of Exit** | 0 | 1 | | 2 | 3 | 2 | 0 | 2 | 3 |
| **Reason for Leaving** | CAREER GROWTH | | | | | | | | | | | | | | | | | | |
| **Employment Type** | 🗹 Full - Time Part-Time | | | | | | | | | | | | | | | | | | |
| **Nature of Employment** | Probation 🗹 Permanent Contractual Temporary | | | | | | | | | | | | | | | | | | |
| **Outsourcing Agency Details, if through contract** | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Employer 2** | | | | | | | | | | | | | | | | | | | |
| **Company Name** |  | | | | | | | | | | | | | | | | | | |
| **Address Line 1** |  | | | | | | | | | | | | | | | | | | |
| **Address Line 2** |  | | | | | | | | | | | | | | | | | | |
| **Address Line 3** |  | | | | | | | | | | | | | | | | | | |
| **City** |  | | | | | | | | | | | | | | | | | | |
| **Postal Code** |  | | | | | | | | | | | | | | | | | | |
| **State** |  | | | | | | | | | | | | | | | | | | |
| **Company Phone No.** |  | | | | | | | **Company Website** | | | | |  | | | | | | |
| **Designation** |  | | | | | | | **Supervisor Name** | | | | |  | | | | | | |
| **Department** |  | | | | | | | **Supervisor’s Designation** | | | | |  | | | | | | |
| **Remuneration (CTC - PA)** |  | | | | | | | **Supervisor’s Email ID** | | | | |  | | | | | | |
| **Employee ID** |  | | | | | | | **Supervisor’s Phone No.** | | | | |  | | | | | | |
| **Date of Joining** | M | M | D | D | Y | Y | Y | | Y | **Date of Exit** | M | M | | D | D | Y | Y | Y | Y |
| **Reason for Leaving** |  | | | | | | | | | | | | | | | | | | |
| **Employment Type** | Full - Time Part-Time | | | | | | | | | | | | | | | | | | |
| **Nature of Employment** | Probation Permanent Contractual Temporary | | | | | | | | | | | | | | | | | | |
| **Outsourcing Agency Details, if through contract** | | | | | | | | | | | | | | | | | | | |

**Letter of Authorization**

**To whom it may concern**

I understand that the information provided by me may be used by **ROBOSOFT TECHNOLOGIES** or any third SSparty agency appointed by the organization to verify and validate the information I have provided including my employment, my personal background, professional standing, work history and qualifications etc.

I understand that the organization or the third party agency appointed by the organization may obtain information it deems appropriate from various sources including, but not limited to current and past employers, criminal conviction records, university / school / college records, professional and personal references and other verifying sources / authorities.

I authorize, without reservation, any individual, corporation or other private or public entity to furnish the organization or the third party agency appointed by the organization, all information about me.

I unconditionally release and hold harmless any individual, corporation, or private or public entity from any and all causes of action that might arise from furnishing to the organization or the third party agency appointed by the organization, that they may request pursuant to this release.

This authorization and release, in original, faxed or photocopied form, shall be valid for this and any future references.

|  |  |
| --- | --- |
| **Signature** |  |
| **Name (In Block Letters)** | AYYALA NAGAMANIKANTA |
| **Date** | 23-01-2023 |