## EMPLOYEE JOINING FORM

| PERSONAL DETAILS                               |                        |                  |             |
|--|------------------------|------------------|-------------|
| Name: Karan Raju                               |                        |                  |             |
| Father's Name: Raju Kunjukutty                 |                        |                  |             |
| Correspondence Address: A-14-B JA<br>NEW DELHI | NTA FLATS, RAGHUE      | BIR NAGAR, TAGOR | E GARDEN,   |
| 110027   |                        |                  |             |
|  |                        |                  |             |
| Permanent Address: A-14-B JANTA                | FLATS, RAGHUBIR N      | AGAR, TAGORE GA  | RDEN, NEW C |
| 110027   |                        |                  |             |
|  |                        |                  |             |
| Telephone: N/A Mobile: 98111 65997Email        | ID: karan9747@hotmail. | com              |             |
|  |                        |                  |             |
| Date of Birth: 25/08/1996                      | Marital Status: NOT MA |                  | NOT MARRIEC |
| Pan Card No: ETSPR5246E                        | Blood Group: 0 -VE     |                  | VE          |
| Emergency Contact Details :                    | '                      |                  |             |
| Name: RAJU KUNJUKUTTY                          | Relation: FATHER       | l .              | Contact N   |
|  | •                      |                  |             |

| PHOTOGRAPH    |
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| EMPLOYMENT DETAILS (LAST THREE ORGANISATIONS) |              |             |                   |    |
|---|--------------|-------------|-------------------|----|
| 5.No  | Organisation | Designation | Period of Service |    |
|   |              |             | From              | То |
| 1   | N/A          |             |                   |    |
| 2   |              |             |                   |    |
| 3   |              |             |                   |    |

| Annual CTC |
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## FAMILY DETAILS

| 5.No | Name            | Relation | Occupation    |
|------|-----------------|----------|---------------|
| 1    | MARIAMMA MATHEW | MOTHER   | HW            |
| 2    | RAJU KUNJUKUTTY | FATHER   | SELF EMPLOYED |
| 3    | KRIPA RAJU      | SIBLING  | STUDENT       |
| 4    | KRISTO RAJU     | SIBLING  | STUDENT       |
| 5    |                 |          |               |

| Date of Birth |
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Name: PROF. DR. SUDHIR KUMAR SHARMA

Organization: IITM JANAKPURI

Designation: DEPARTMENT HOD

Contact No: 99114 10841

Name: PROF. DR. HARMEET MALHOTRA

Organization: IITM JANAKPURI

Designation: CLASS MENTOR

Contact No:98109 98122

## DECLARATION

I hereby declare that the above statements made in my application form are true, complete and correct to the best o knowledge and belief. In the event of any information being found false or incorrect at any stage, my services are lia terminated without notice.

Date: <u>06-04-2022</u>

Place: GURUGRAM, HARYANA Signature

## RHOPHIANALYTICS-3123/B, SECTOR 52, CHANDIG ARH, 16003