## LT CANDIDATE VERIFICATION FORM V 1.1

	FULL NAME IN BLOCK LETTERS  BIRTH DATE [DD/MM/YYYY]												
PERSONAL DATA*	PERIYANAYAKI				ANANTHAN				۸N	ODDANCHATRAM			
	(FIRST)				(MIDDLE)				(LAST)			BIRTH PLACE	
AL	TELEPHONE (With Code)				CELL:				9500726062				
SON	E-MAIL:			nayakinaveen@gmail.com									
PER	GENDER	MARITAL STATUS		MARRIAGE DATE (If Married)		NATIVE STATE		NATIO	IATIONALITY		FATHER'S NAME		
	FEMALE	SINGLE				TAMIL NADU		INE	INDIAN		ANAN	ANANTHAN C	
						Curren	t Addre	ss*					
	House Number or Flat Number*			Pannadi	Thottam	Street Address*			Poolampatti				
	City*			Palani		State*			Tamil Nadu				
	Pin code*			624	4613 House Type*: C Rented			/	Rented				
IILS	Prominent Landmark*			Near Pc					Poolampatti				
ADDRESS DETAILS*	Stay From*: (DD/MM/YYYY)		6/5/	1998	Stay To*: (DD/MM/YYYY)			28/06/2021					
ESS						Permane	nt Addr	ress*					
ADDR	House Number or Flat Number*		Pannadi Thottam		Street Address*			Poolampatti					
	City*		Palani		State*			Tamil Nadu					
	Pin code*		624	House Type*: Ow Rented			/	Rented					
	Prominent Landmark*						Near Po	ar Poolampatti					
	Stay From*: (DD/MM/YYYY)		6/5/	Stay To*: (DD/MM/YYYY)				28/06/2021					
EDU	CATION	*											
EXAM	EXAMINATION PASSED SPECIALISATI ON		SCHOOL / INSTIT		UNIVERSITY/ BOARD	WHETHE FULLTIME PARTTIME CORRES	E/ C	RATION OF COURSE s & Mths)	MONTH & YEAR OF PASSING	GRADE % MARKS	DISTINCTIONS / SCHOLARSHIPS / PRIZES WON		
SSC OR Equivalent School leaving Certificate		N/A		Secondary	Tamil Nadu State Board	Full Tim	ne 12	months	Apr-13	91%			
Intermediate or 12th standard / HSC			N/A	Veveaha Seconda	m Higher ry School	Tamil Nadu State Board	Full Tim	ne 12	months	Apr-15	95%		
DIPLOMA													
DEGREE (S)	Bachelo Enginee		Computer Science Engineering	Kongu En Coll	gineering ege	Anna University	Full Tim	ne 4	4 year	Apr-19	80%		

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EE /											
ICAT											
AD. C											
IST. GRAD. DEGREI											
POST. GRAD. DEGREE DIP. CERTIFICATE											
WORK EXPERIENCE*											
In unbroken chronolog	gical order starting from y	your present	employmen	t and endir	ng with first e	mployment	t				
(Please account for all the periods of time not covered by education / training) [Please attach extra sheet if required]  Name of the DURATION											
Employer/Company	PERIOD(Yrs.)	LAS	ELD DESIGNA	ATION	NATURE OF DUTIES						
	2 years 5 months					I was working in the part of migration project and application was migrated to JAVA from C/C++.					
Cognizant Technology	FROM (DD-MM-YYYY)		Programm	ner Analyst		I Played the role of rewriting existing C/C++ codes in JAVA and taking care of complete application build and coordinated with deployment team.					
Solution, Coimbatore	19-01-2019	HR NAME & 0	AILS ( Mail II	O & Phone No.)	NAME & DESIGNATION OF IMMEDIATE SUPERIOR CONTACT DETAILS( Mail ID & Phone No.)						
	TO (DD-MM-YYYY)	المنابات المناب	(C db.:_b   1/.::-	h 1/Oi-		Kumaresan & Project Manager(Kumaresan.Alagappan@cognizant.com)					
	9/7/2021	Suanisn	(Sudhish.Kris	nnak@cogniz	zant.com)						
	GROSS EMOLUMENTS Rs. Per month	AT THE TIME OF JOINING 24750		4750	LAST [	DRAWN	35937				
Employee Code	Details of Current	BASIC	(P.M.)	FIXE	D (P.A.)	VARIABI	LE (P.A.)	GROSS (P.A.)			
	Emoluments	12000 431240				20	000	451240			
Name of the Employer/Company	Name of the DURATION Employer/Company PERIOD(Yrs.)		T POSITION H	ELD DESIGNA	ATION		NATURE	OF DUTIES			
	FROM (DD-MM-YYYY)										
		HR NAME & 0	CONTACT DET	AILS ( Mail II	O & Phone No.)	NAME & DESIGNATION OF IMMEDIATE SUPERIOR CONTACT DETAILS( Mail ID & Phone No.)					
	TO (DD-MM-YYYY)										
Employee Code											
	GROSS EMOLUMENTS Rs. Per month	AT THE TIME	OF JOINING			LAST [	DRAWN				
Name of the Employer/Company	DURATION PERIOD(Yrs.)	LAST POSITION HELD DESIGNATION				NATURE OF DUTIES					
	FROM (DD-MM-YYYY)										
		HR NAME & (	CONTACT DET	AILS ( Mail II	) & Phone No.)	NAME & DESIGNATION OF IMMEDIATE SUPERIOR CONTACT DETAILS( Mail ID & Phone No.)					
Employee C	TO (DD-MM-YYYY)										
Employee Code	GROSS EMOLUMENTS Rs.										
	Per month		AT THE TIME OF JOINING				LAST DRAWN				
Name of the Employer/Company	DURATION PERIOD(Yrs.)	LAS	T POSITION H	ELD DESIGNA	ATION	NATURE OF DUTIES					
	,										
	FROM (DD-MM-YYYY)										
		HR NAME & (	CONTACT DET	AILS ( Mail II	O & Phone No.)	NAME & DESIGNATION OF IMMEDIATE SUPERIOR CONTACT DETAILS( Mail ID & Phone No.)					
	TO (DD-MM-YYYY)										

				Į.	ı				
Employee Code									
	GROSS EMOLUMENTS Rs. Per month	AT THE TIME OF JOINING			LAST [	DRAWN			
Name of the Employer/Compa	DURATION nny PERIOD(Yrs.)	LAST POSITION HI	ATION	NATURE OF DUTIES					
	· · ·								
	FROM (DD-MM-YYYY)								
		HR NAME & CONTACT DETAILS ( Mail ID & Phone No.)			NAME & DESIGNATION OF IMMEDIATE SUPERIOR CONTACT DETAILS( Mail ID & Phone No.)				
	TO (DD-MM-YYYY)								
Employee Code									
	GROSS EMOLUMENTS Rs. Per month	AT THE TIME OF JOINING			LAST [	DRAWN			
Name of the Employer/Compa	DURATION any PERIOD(Yrs.)	LAST POSITION HI	ATION	NATURE OF DUTIES					
	FROM (DD-MM-YYYY)								
		HR NAME & CONTACT DETAILS ( Mail ID & Phone No.)			NAME & DESIGNATION OF IMMEDIATE SUPERIOR CONTACT DETAILS( Mail ID & Phone No.)				
	TO (DD-MM-YYYY)								
Employee Code									
	GROSS EMOLUMENTS Rs. Per month	AT THE TIME OF JOINING			LAST DRAWN				
I declare that the information given above is true to the best of my knowledge. I am aware that any false or incorrect information by me may result in termination of my service with the Company. I have no objection to your inquiring from any of my previous employers on any matters pertaining to me, if I join your Company.									
PLACE		Palani	DATE			6/28/2021			

<sup>&</sup>quot;This is a system-generated electronic form and does not require any signature"