

Information questionnaire subclass 482

Employment Particulars:

Sponsoring company	Tata Consultancy Services Ltd
Date to commence employment with TCSL in Australia.	
Project WON/SWON	20186849
Intended date of arrival and departure (dd/mm/yyyy) - (dd/mm/yyyy)	4/12/2021- 3/12/2023
Internal iEvolve Title	
TCS Grade	C2
Do you have an existing relationship with any of the owners, directors or principals of TCS?	<input type="checkbox"/> Yes (please provide details) <input checked="" type="checkbox"/> No

Personal particulars:

Your full name (as per your passport)	NIKITA RAMESH PATIL
Previous names (other names you have been known by including use of initial)	PATIL NIKITA RAMESH
Please provide the full names and date of birth of family members included in your visa application <i>Please advise us immediately if any children included in this visa application are not being accompanied by both birth parents</i>	NA

If dependents are not included in this application, kindly provide a reason. It is important to note dependents not included in the initial application will not be eligible to apply for a visa if there is 6 months or less left on the current visa.

Contact Details:

Home Phone:	
Work Phone:	
Mobile:	+91 9970815079
Email:	nikitar.patil@tcs.com
Current Residential Address:	D-43/15, SWAMI VIVEKANAND NAGAR, N-12, HUDCO, AURANGABAD, MAHARASHTRA , PIN- 431003

Marital Status:

Marital status <i>(mark only 1 where appropriate)</i>	<input checked="" type="checkbox"/> Never Married <input type="checkbox"/> Married <input type="checkbox"/> Engaged <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> De Facto
If married, please provide date of marriage:	
If engaged, please provide date of intended marriage:	
If de facto, please provide the date your relationship Began	

National Identity Cards/Numbers:

Please provide details of any National Identity cards, social security cards or alien registration numbers you or any accompanying family members hold or have held in the past.

Type of card (Aadhaar/PAN) for NIKITA RAMESH PATIL	Aadhaar
Country of issue	India
Number	625192940990

Citizenship – yourself:

Please provide the following details of citizenship for you and your family.

Present country of citizenship	India
Do you or any of your accompanying family members hold citizenship of another country? If yes, please provide details.	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If yes, mandatory to provide details) <i>Citizenship:</i> <i>Date of grant:</i>
Town & city of birth:	AKOLA

Visa History:

Have you previously visited Australia?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If yes, please provide date of last entry to Australia [dd/mm/yyyy])
Details of any current or previous Australian visas held	
Have you or any person included in your visa application have applied for further visa (e.g subclass 189)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If yes, mandatory to provide details) <i>TRN:</i> <i>Visa Type/Subclass:</i> <i>Date of application (DD/MM/YY):</i> <i>Place of application:</i>

Have you or any person included in your visa application, ever had an Australian visa refused or cancelled	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If yes, mandatory to provide details)
Have you or any person included in your visa Application, ever held an Australian bridging visa E? (BVE - usually given to people who have no other visa, to facilitate departure)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If yes, mandatory to provide details)
If in Australia, details of any proposed travel during the preparation and processing of this visa application	
If you or a family member is currently in Australia as the holder of a student visa do you receive financial support from the Australian government through AusAid, or a foreign government?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If yes, mandatory to provide details)

Travel History

In the last 10 years have you or any family members visited any countries outside of your usual country of residence since turning 16 years of age?

☒ No ☐ Yes (If yes, mandatory to provide details)

☐ work, study, or training

☐ business

-
- ☐ visit family
 - ☐ holiday or leisure
 - ☐ military deployment
 - ☐ Other (please provide details):

Countries:

Date: From:

To:

Reason for visit:

- ☐ work, study, or training
- ☐ business
- ☐ visit family
- ☐ holiday or leisure
- ☐ military deployment
- ☐ Other (please provide details):

Countries:

Date: From:

To:

Reason for visit:

- ☐ work, study, or training
- ☐ business
- ☐ visit family
- ☐ holiday or leisure
- ☐ military deployment
- ☐ Other (please provide details):

Countries of residence

Give details of all countries where you and your family (if applicable) have spent a total period of time that adds up to 12 months or more in the past 10 years since turning 16 years of age.

Please complete the "address grid" at the end of the questionnaire

Educational Qualifications

Give details of all the qualifications for you and your family (if applicable).

Please complete the "Qualifications grid" at the end of the questionnaire.

Health Examinations:

Have you undertaken a health examination for an Australian visa in the last 12 months?

☒ No ☐ Yes (If yes, mandatory to provide details)

Please enter the HAP ID (if known)

Health Declarations:

As part of your application, you may be required to complete a medical questionnaire for the purposes of determining whether a health examination and/or xray is required to meet the health criteria for the visa.

Do you have any health conditions/problems that you are aware of?

☒ No ☐ Yes (If yes, mandatory to provide details)

☐ If yes have you provided the following

Most recent letter from doctor outlining history of condition and your current status of your medical condition.
The letter should also state which medications (if any) you are currently taking.

If yes have you provided the following

Most recent letter from doctor outlining history of condition and your current status of your medical condition. The letter should also state which medications (if any) you are currently taking.

In the last five (5) years, have you or any person in this application visited or lived outside your country of passport (i.e. the country that your passport is issued by)? for more than three (3) consecutive months (not including Australia)?

☒ No ☐ Yes (If yes, mandatory to provide details)

Health Declarations continued:

During your proposed stay in Australia, do you or any person included in this application:

- ☐ intend to enter an Australian hospital or other health care facility (including nursing homes)?
- ☐ intend to work as, or study to be, or train to be, a doctor, dentist, nurse or paramedic?
- ☐ intend to work, or be a trainee, at a child care centre (including preschools and creches)?
- ☐ intend to be in a classroom situation for more than three (3) months (eg as either a student, teacher, lecturer or observer)?
- ☒ No (none of the above)

If any of the first 4 apply, it is mandatory to provide details

** Explanation: Your response will assist us in identifying if any additional health items need to be completed.*

Please select 4th point check box and mention reason “S/he(Child Name) will be attending the school in future”, if visa applied for child also.

Have you or any applicants included in this application (*mark more than 1 where appropriate*):

- ☐ ever had or currently have tuberculosis?
- ☐ ever had/or currently have any serious disease, condition or disability (including mental illness)?

☐ Is anyone included in the application pregnant? (This can affect timing of the application)

☐ No (none of the above)

If any of the first 3 apply, it is mandatory to provide details

** Explanation: Your response will assist us in identifying if any additional health items need to be completed.*

Have you (or any accompanying family members) ever had or currently have tuberculosis (TB), been in close contact with a person who has active TB or ever had an abnormal chest x-ray?

☒ No

☐ Yes (If yes, mandatory to provide details)

Health Declarations continued:

During the proposed stay in Australia, will you (or any accompanying family member/s) expect to incur medical costs, or require treatment or medical follow up for:

☐ Blood disorders

☐ Cancer

☐ Heart disease

☐ Hepatitis B or C

☐ Liver disease

☐ Mental illness

☐ Pregnancy

☐ HIV infection (including AIDS)

☐ Any form of

☐ Any other health

☐ Kidney disease (including dialysis)

☐ Respiratory disease that requires hospital admission or oxygen therapy

☒ No (none of the above)

If any above apply, it is mandatory to provide details

Do you (or any accompanying family member/s) require assistance with mobility or care in Australia or overseas?

☒ No

☐ Yes (If yes, mandatory to provide details)

Have you or any applicants included in this application spent a period of 28 days or more, after 5 May 2014 in the following countries or in any combination of these countries (mark more than 1 where appropriate):

- | | |
|--|--|
| <input type="checkbox"/> Afghanistan | <input type="checkbox"/> Israel |
| <input type="checkbox"/> Cameroon | <input type="checkbox"/> Nigeria |
| <input type="checkbox"/> Equatorial Guinea | <input type="checkbox"/> Pakistan |
| <input type="checkbox"/> Ethiopia | <input type="checkbox"/> Somalia or Syria |
| <input type="checkbox"/> Iraq | <input checked="" type="checkbox"/> No (none of the above) |

Health insurance:

Do you hold health insurance for yourself and your accompanying family members?

- ☒ No
- ☐ Yes (If yes, mandatory to provide details)

Character Declarations:

Have you (or any accompanying family member/s) ever (tick any that applies):

- ☐ been charged with an offence which is currently waiting legal action?
- ☐ been convicted of an offence in any country (including any conviction which is now removed from official records)? ☐
- been the subject of an arrest warrant or Interpol notice?
- ☐ been found guilty of a sexually based offence involving a child (including where no conviction was recorded)?
- ☐ been named on a sex offender register?
- ☐ been acquitted of any offence on the grounds of unsoundness of mind or insanity?
- ☐ been found by a court not fit to plead?
- ☐ been directly or indirectly involved in, or associated with, activities which would represent a risk to national security in Australia or any other country?
- ☐ been charged with, or indicted for: genocide, war crimes, crimes against humanity, torture, slavery, or any other crime that is otherwise of a serious international concern?
- ☐ been associated with a person, group or organisation that has been or is involved in criminal conduct?
- ☐ been associated with an organisation engaged in violence or engaged in acts of violence (including war, insurgency, freedom fighting, terrorism, protest) either overseas or in Australia?
- ☐ Ever undergone any military/paramilitary training, been trained in weapons/explosives or in the manufacture of chemical/biological products?
- ☐ ever served in a military force, police force, state sponsored/private militia or intelligence agency (including secret police)?
- ☐ been involved in people smuggling or people trafficking offences?
- ☐ been removed, deported or excluded from any country (including Australia)?
- ☐ ever overstayed a visa in any country (including Australia)?
- ☐ ever had any outstanding debts to the Australian Government or any public authority in Australia movement of people into the country?
- ☒ No (None of the above)

If any above apply, mandatory to provide details

English Language:

Is English your first language (mother tongue)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (What is your main language)? Marathi
Have you undertaken an English test in the last 36 months?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If yes, madatory to provide details) Name of test: Date of test: [REDACTED] Test reference number: [REDACTED] Country where test was taken: Test scores for: Speaking - reading - writing - listening - Test overall band score:
Have you studied for at least 5 years in a secondary and/or higher institution where instruction was in English?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes* <i>*Please attach details – ie transcript, details of institute, qualification, number of English instruction hours per week and the number of years of continuous study</i>
Is there any English language requirement associated with your professional registration? (if applicable)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes* <input type="checkbox"/> Not Applicable (registration required) <i>*Please provide details</i>

Salary:

Have you agreed to pay the employer or the employer's agent for any purpose whatsoever including, but not limited to, recruitment, travel, visa application, agent fees?

☒ No

☐ Yes (If yes, please give details of the purpose and value of the payment)

Declarations:

In the event that the company applications (sponsorship or nomination) are refused or withdrawn, do you wish to withdraw yours (and any accompanying family member's) visa application(s)?

Please note, your visa application cannot be approved without the sponsoring company holding a valid sponsorship and the nomination application being approved.

☒ Yes

If you withdraw your application, the case will be considered closed and you will forego any review rights to which you might have been entitled.

☐ No

If you do not withdraw your application, a decision will be made on your application

Declarations continued: eMedical

You understand that:

the Commonwealth of Australia becomes the owner of the information entered into eMedical and that this information will be passed to the Department; the Department is authorised to collect and use the personal information entered into eMedical under section 60 of the Migration Act 1958; your personal information (including sensitive information) stored in eMedical (including medical results, bio details and digital photographs) may also be disclosed to:

☐ No

☒ Yes

<ul style="list-style-type: none"> - Australian Government health agencies, health and settlement service providers and examining doctor(s); - Australian Government agencies authorised to receive information relating to adoption, border control, business skills, citizenship, education, health assessment, health insurance, health services, law enforcement, payment of pensions and benefits, taxation, superannuation, review of decisions, child protection and registration of migration agents; - Australian law enforcement, health agencies and international agencies, including overseas recipients in the United Kingdom, the United States of America, Canada and New Zealand, for the purposes of identity checking. <p>You consent to:</p> <ul style="list-style-type: none"> - your medical information being submitted to the Department for the purposes of assessing your health for current or future Australian visa applications; - The Department retaining your medical information, including any x-ray images uploaded to eMedical, beyond the finalisation of your visa application, for the purposes of considering future applications you may make for a visa to Australia; - The Department disclosing your personal information, including information about your health, to the radiologists/panel doctors who have examined you. - The Department storing your digital photograph(s) which may be used by the Department for client identification purposes in addition to the health examination process. 	
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Declarations continued:

<p><u>Payment to nominator</u></p> <p>Do you certify that you have not made any form of payment (or promised to pay) the person who nominated you (or any of their associates), either directly or indirectly through another party, for nominating you or any family members identified in this application?</p>	<div> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes </div>
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False/misleading

Do you declare that:

- The information provided in this form is correct and up to date
- You understand that if any fraudulent documents or false or misleading information has been provided with this application or if you fail to satisfy the Minister or your identity, your application may be refused and you, and any member of your family unit, may become unable to be granted a visa for a specified period of time
- You understand that if documents are found to be fraudulent or information to be incorrect after the grant of a visa, the visa may subsequently be cancelled

☐ No☒ Yes**Health Insurance**

Do you declare that you and any other applicants included in the application have made adequate arrangements for health insurance during the period of your intended stay in Australia and will provide a letter from your insurer confirming this

☒ No☐ Yes**Visa conditions**

Do you declare that you will abide by the conditions of your visa?

☐ No☒ Yes**Declarations continued:****Privacy**

Do you declare that:

- You have read the information contained in the Privacy Notice (Form 1442i)*?
- you understand that the department may collect, use and disclose your personal information (including biometric information and other sensitive information) as outlined in the Privacy Notice (Form 1442i)*?
- you understand that, if required to provide your fingerprints and facial image, the fingerprints

☐ No☒ Yes

<p>and facial image and biographical information held by the Department may be given to Australian law enforcement agencies to help identify you and determine your eligibility for grant of the visa being applied for, and for law enforcement purposes.?</p> <p>You give consent to:</p> <ul style="list-style-type: none"> • The collection of your fingerprints and facial image? • Australian law enforcement agencies disclosing your biometric, biographical and criminal record information to the Department of Immigration and Border Protection to help identify you and determine eligibility for grant of the visa being applied for, and for law enforcement purposes • The Department of Immigration and Border Protection using your biometric, biographical and criminal record information obtained for the purposes of the <i>Migration Act 1958</i> or the <i>Citizenship Act 2007</i>. 	<p>*Privacy Notice (Form 1442i) can be viewed at: https://www.border.gov.au/Forms/Documents/1442i.pdf</p>
<p><u>Declaration by parent/guardian</u></p> <p>I certify that:</p> <p>Where the visa applicant is under 18 years of age, I am not aware of any reason why the visa applicant should not travel to Australia (the custody/access/guardianship rights of another person are not affected)</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Should provide "Yes" for "Declaration by parent/guardian" section when child visa applied along with self or else select "No"

Declarations continued:

Vevo

During the application process, the TCS Immigration Team may need to confirm your visa status and your right to work in Australia. This is done through VEVO, an online facility that allows us to check your visa entitlements and right to work.

The terms and conditions of use of VEVO require that your consent is obtained prior to collecting information about you.

By conducting a VEVO inquiry we will obtain certain information about you, namely your name, date of birth, passport details and visa status.

We will not pass that information onto anyone without your consent. However, if you are not entitled to be in Australia, the Commonwealth may use the TCS Immigration team's VEVO account details to locate you.

I provide consent to the TCS Immigration team undertaking a VEVO enquiry

☐ No

☒ Yes

Declaration by parent/guardian

I certify that: Where the visa applicant is under 18 years of age, I am not aware of any reason why the visa applicant should not travel to Australia (the custody/access/guardianship rights of another person are not affected)

☒ No

☐ Yes

Australian values statement

Australian values include respect for the freedom and dignity of the individual, freedom of religion, commitment to the rule of law, Parliamentary democracy, equality of men and women and a spirit of egalitarianism that embraces mutual respect, tolerance, fair play and compassion for those in need and pursuit of the public good.

Australian society also values equality of opportunity for individuals, regardless of their race, religion or ethnic background. Therefore, I will respect these Australian values during my stay in Australia and obey the laws of Australia.

All applicants aged 18 and above must sign this declaration:

Signature:



Signature:

Signature:

I authorise the TCS Immigration team to act on my behalf with regard to my application for a subclass 482 visa and understand they may receive written communication regarding myself or any secondary applicants in this application in relation to the visa process.

Signature:

AUTHORISATION TO LODGE VISA APPLICATION

I **NIKITA RAMESH PATIL** certify that:

The information on this form is true and correct and I authorise the TCS Immigration Team to populate the visa form on the basis of the information and supporting documents that I have provided, and that my employer has provided (such information and documents may include passport information, resume, employment contract and salary information). I authorise the application to be lodged by a registered migration agent with the Department on my and my family's behalf.

I will also notify the TCS Immigration Team:

If I become aware that any information that I have provided in this questionnaire or within the supporting documentation is incorrect; and

There is a change in my personal circumstances that affect how I have answered any of the questions in this questionnaire

Applicant 1 Sign:.....(main applicant)

Address Grid (Please provide last 10 years staying address for self & spouse)

Name	Date “from” and “to”	Residential Address 1	Residential Address 1	Country
NIKITA RAMESH PATIL	18/03/2020 - Till date	D-43/15, Swami Vivekanand Nagar, N-12, HUDCO, Aurangabad, 431003		India
NIKITA RAMESH PATIL	19/10/2015 – 18/03/2020	Survey No. 193/3, Suvarna Building, Bhausahab Kalate Nagar, Wakad, Pune 411057		India
NIKITA RAMESH PATIL	5/08/2011 - 19/10/2015	D-43/15, Swami Vivekananda Nagar, N-12, HUDCO, Aurangabad, 431003		India

Education History (All educational details should be provided)

Name	Date “from” and “to”	Course name	Institution name	Country	Full time or parttime
NIKITA RAMESH PATIL	01/07/2011 – 30/06/2015	Bachelor of Engineering	Government College of Engineering Aurangabad, Maharashtra	India	Full Time
NIKITA RAMESH PATIL	01/07/2009 – 29/05/2011	Class 11 to 12	Shri Shivaji High School, Bharaj Bu., Jafrabad, Maharashtra	India	Full Time
NIKITA RAMESH PATIL	01/07/1999 – 25/06/2009	Class 1 to 10	New High School Jafrabad, Maharashtra	India	Full Time

Work Experience History (Please provide all the work experience details; under “Position title”, provide designation and not project role)

Name	Date “from” and “to”	Company name	Country	Position title	Full time or parttime
NIKITA RAMESH PATIL	19/10/201 5 – Till date	Tata Consultan cy Services	India	IT ANALYST	Full Time