

APPLICATION FORM

Please fill in the details with utmost attention, as these shall be verified by HCL Technology Limited and/ or by its authorized representatives.

All details are compulsory.



PERSONAL DETAILS

Full Name of Applicant:

Nitesh Patel.

HCL SAP Code:

52032666

HCL Official Email id:

nitesh.patel@hcl.com

HCL Office Address:

HCL Technologies Ltd, SAL(602),
6th floor, Tower 4, special economic zone (SEZ),
129, Jigani Industrial Area, Bomansandra - Jigani
Link Road, Bangalore - 562106

Date of Birth (dd/mm/yy):

08/10/1990

Place of Birth:

Dei Indore

Sex:

male

Nationality:

Hindu

Father's Name:

Brahmanand Patel

Passport No.:

L5158725

Home Phone:

Office Phone:

Mobile:

9713069176

RESIDENTIAL ADDRESSES

PERMANENT ADDRESS:

299, LGH, Vikas Nagar

City:

Dewas

State:

M.P

Pin Code:

455001

Phone No.:

Duration of Stay: From (mm/yy)

To (mm/yy)

(01/2000) (05/22)

Nature of location:

☐ Rented

☒ Own

☐ Other (Specify)

LANDMARK:

Muskan Hair Cutting Salon.

All details are compulsory

CURRENT ADDRESS: 299, LIC, Vikas Nagar			
City: Dewas	State: M.P	Pin Code: 455001	Phone No.:
Duration of Stay: From (mm/yy) 02/2019 To (mm/yy) 05/2022		Nature of location: <input type="checkbox"/> Rented <input checked="" type="checkbox"/> Own <input type="checkbox"/> Other (Specify)	
LANDMARK: Muskan Hair Cutting Salon			

Address History:

Period Of Stay		Address	Landmark	Pincode	State	Country	Contact number
From MM-YY	To MM-YY						
09/13	04/14	Mulund Amit Co-Hsg Soc	Mulund east bridge	400081	(M.H) Maharashtra	India	-
05/14	08/15	299, LIC, Vikas Nagar	Muskan Hair Salon	455-001	(M.P)	India	
08/15	07/17	G-25, N-BLOCK Men's Hostel, VIT university	VIT university	632014	(T.N)	India	04162-2025-20
07/17	12/17	299, LIC, Vikas Nagar	Muskan Hair Salon	455001	(M.P)	India	
12/17	02/19	Shri Ham PG near Ashram Road	-	580014	(G.J)	India	
02/19	05/22	299, LIC, Vikas Nagar	Muskan Hair Salon	455001	(M.P)	India	

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EDUCATION DETAILS							
QUALIFICATION	NAME & ADDRESS OF SCHOOL / COLLEGE / INSTITUTE	NAME & ADDRESS OF BOARD / UNIVERSITY TO WHICH THE SCHOOL / COLLEGE / INSTITUTE IS AFFILIATED TO	COURSE ATTENDED (MORNING / EVENING / CORRESPONDENCE)	MARKS (%) CGPA & CLASS	DATES ATTENDED		ROLL NUMBER / REGISTRATION NUMBER / EXAM SEAT NUMBER
					YEAR OF ENROLMENT (MM/YY)	YEAR PASSED (MM/YY)	
GRADUATION							
DEGREE: B.E DISCIPLINE: <input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Part time <input type="checkbox"/> Distance learning course	AITR, Indore	RGPV, Bhopal	EM Mechanical	67%	2009	2013	0827ME0-91046
POST GRADUATION							
DEGREE: M.Tech DISCIPLINE: <input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Part time <input type="checkbox"/> Distance learning course	VIT, university - sity	VIT, university vellore	CAD/CAM	7.6 (CGPA)	2015	2017	15MCD00-29
ANY OTHER							

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HCL TECHNOLOGIES LTD.

EMPLOYMENT RECORD: Starting with your present or most recent employer, please list last 5 employments. When listing consulting or temporary assignments, under "Employer", state the name of the consulting or temporary agency that placed you at the client site. Complete and accurate dates (month/year) must be provided.

EMPLOYER 1: IT Geeks Techno -logies Pvt Ltd		Employee Id: 100079	From (mm/yy): 02/11/19	To (mm/yy): 21/21
Street Address: Yamuna Nagar, AB Road. above Tata motors		Employer's Phone No.: 93408 27988	Fax No.:	
City: Dewas	State: M.P	Country: India	Postal Code: 455001	
Job Title: Software Engineer Trainee	Reason for leaving: Looking better opportunity			
Employment Status: (Please check the relevant box)		Supervisor's Details:		
<input checked="" type="checkbox"/> Full Time		Name: Rahul parihar		
<input type="checkbox"/> Contract /Through Outsourcing Agency		Title:		
Outsourcing Agency Details:		Phone No.: 7415222523		
Name:		E-mail id: rahul@itgeeksim.com		
Address:		(Preferably official)		
Tel No.:		HR Manager's Details:		
Description of Duties: Work on Java and Spring boot		Name: Madhurya Jain		
		Phone No.: 93408 27988		
		E-mail id: mh@itgeeksim.com		
		(Preferably official)		

EMPLOYER 2: B.M. Techno Machine Pvt Ltd		Employee Id:	From (mm/yy): 02/2017	To (mm/yy): 02/2019
Street Address: Ethil Mfg - Chittoorgaon Sales & Mkt - Ahmedabad		Employer's Phone No.:	Fax No.:	
City: Chittoorgaon	State: R.J	Country: India	Postal Code:	
Job Title: Sales Engineer	Reason for leaving: Unavoidable Circumstances need come Home			
Employment Status: (Please check the relevant box)		Supervisor's Details:		
<input checked="" type="checkbox"/> Full Time		Name: Vishal tickoo		
<input type="checkbox"/> Contract /Through Outsourcing Agency		Title: Sales Manager		
Outsourcing Agency Details:		Phone No.: 8860646175		
Name:		E-mail id: vishal@bmindustries.com		
Address:		(Preferably official)		
Tel No.:		HR Manager's Details:		
Description of Duties: Handling Business development		Name: Rajendra		
		Phone No.: 9680165721		
		E-mail id: sales.bmtechno@gmail.com		
		(Preferably official)		

EMPLOYER 3: Spraytech India Pvt Ltd	Employee Id: -	From (mm/yy): 09/13	To (mm/yy): 04/24
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Street Address: Plot no. A-132, Road no. 23 Spray Arch, Coag. Industrial Area (Hane)		Employer's Phone No.:		Fax No.:	
City: Mumbai	State: M.H	Country: India	Postal Code: 400604		
Job Title: Sales Engineer		Reason for leaving: Opt. for CHATE Pre- - promotion			
Employment Status: (Please check the relevant box)			Supervisor's Details:		
<input checked="" type="checkbox"/> Full Time			Name: Ankus Jain		
<input type="checkbox"/> Contract /Through Outsourcing Agency			Title: Manager		
Outsourcing Agency Details:			Phone No.:		
Name:			E-mail id: sales@spraytechindia.com		
Address:			(Preferably official)		
Tel No.:			HR Manager's Details:		
Description of Duties: Handling Industrial sales			Name: Balkrishna dhavall		
			Phone No.: 9987585553		
			E-mail id: hnd@spraytechindia.com		
			(Preferably official)		

EMPLOYER 4:		Employee Id:		From (mm/yy):		To (mm/yy):	
Street Address:				Employer's Phone No.:		Fax No.:	
City:	State:	Country:		Postal Code:			
Job Title:		Reason for leaving:					
Employment Status: (Please check the relevant box)				Supervisor's Details:			
<input type="checkbox"/> Full Time				Name:			
<input type="checkbox"/> Contract /Through Outsourcing Agency				Title:			
Outsourcing Agency Details:				Phone No.:			
Name:				E-mail id:			
Address:				(Preferably official)			
Tel No.:				HR Manager's Details:			
Description of Duties:				Name:			
				Phone No.:			
				E-mail id:			
				(Preferably official)			

EMPLOYER 5:		Employee Id:		From (mm/yy):		To (mm/yy):	
Street Address:				Employer's Phone No.:		Fax No.:	
City:	State:	Country:		Postal Code:			
Job Title:		Reason for leaving:					

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Employment Status: <i>(Please check the relevant box)</i>	Supervisor's Details:	
Full Time	Name:	
Contract /Through Outsourcing Agency	Title:	
Outsourcing Agency Details:	Phone No.:	
Name:	E-mail id:	
Address:	<i>(Preferably official)</i>	
Tel No.:	HR Manager's Details:	
Description of Duties:	Name:	
	Phone No.:	
	E-mail id:	
	<i>(Preferably official)</i>	

Professional References:

Reference Name	Reference Mobile Number	Company name	Reference official number
Mayank vinchurkar	7767038282	impetus Indore	
Rahul shing	7415222523 7415222523	IT CHECKS Technolo gy Pvt Ltd	
Vikas Pr			

INFORMATION RELEASE AUTHORIZATION

- I certify that the statements made in this application are valid and complete to the best of my knowledge. I understand that false or misleading information may result in termination of employment.
- If upon investigations, any of this information is found to be incomplete or inaccurate, I understand that I will be subject to dismissal at any time during my employment.
- I hereby authorize **HCL Technologies** and/or any of its subsidiaries or affiliates and any persons or organizations

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HCL TECHNOLOGIES LTD.

acting on its behalf (TP -----), to verify the information presented on this application form and to procure an investigative report or consumer report for that purpose.

- ☐ I hereby grant authority for the bearer of this letter to access or be provided with full details of my previous records. In addition, please provide any other pertinent information requested by the individual presenting this authority.
- ☐ I hereby release from liability all persons or entities requesting or supplying such information.
- ☐ I authorize HCL Technology Ltd. to contact my previous employer. Yes ☒ No ☐
- ☐ I have read, understand, and by my signature consent to these statements.

SIGNATURE:

N Patel

NAME (IN BLOCK LETTERS):

NITESH PATEL

DATE:

05/2022**Documents checklist****Application Form:**

- Duly signed application form

Education Verification:

- Photocopy of degree certificate and all years / semesters marks sheets

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HCL TECHNOLOGIES LTD.

- Photocopy of provisional degree certificate required for courses completed in the last 6 months from the current date

Employment Verification:

- Photocopy of relieving certificate, service certificate, latest salary slips & offer letter
- Resignation acceptance letter is required in case full & final settlement is pending with employer

Address Verification:

- Address proof would be required (Copy of passport, driving license, utility bills, rental agreement or lease agreement)

Criminal verification:

- One photo id proof (Copy of passport, PAN card or voters ID)
- Address proof would be required (Copy of passport, driving license, utility bills, rental agreement or lease agreement)
- CID form (Demand draft of INR 100 mentioned in the form is not required)

Identity verification:

- Copy of valid passport and PAN card required

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