

Curriculum-Vitae

Komal

O-46 Chanakya place part-II
New Delhi- 110059
Mob – 8750886084
kinjalchoudhary327@gmail.com

OBJECTIVE

To work with a reputed and organization, to build my career by optimum utilization of my talent and hard work in the organization.

Work Experience (3 Month with MeitY)

EDUCATIONAL QUALIFICATION:

Educational Qualification	Board/University	Year of Passing	Score
M.COM.	IGNOU	Pursuing	
B.COM.	Delhi University	2013-2016	II Division
Senior Secondary	C.B.S.E.	2012-2013	II Division
Higher secondary	C.B.S.E.	2010-2011	II Division

KEY SKILLS & COMPETENCIES

- Excellence Project & time management Skills.
- Maintaining accurate records & reacting to problems quickly.
- Typing Speed in English 35 W.P.M.
- Shorthand in English 80 W.P.M.

PERSONAL INFORMATION

Name : Komal
Father Name : Mr. Brij kishore
Date of Birth : 1 Feb, 1996
Languages Known : English & Hindi

Gender : Female
Marital Status : Unmarried

STRENGTH

- Responsible.
- Sincere attitude towards work.
- Presentation and Leadership Skills.
- Excellent problem solving skills.
- Excellent coordination skills.

DECLARATION

I hereby declare that the information furnished above is true and correct to the best of my knowledge.

(Komal)



Place : New Delhi

Date :

Human Resource Inventory

Name of the Candidate / Applicant	Komal
Address of Correspondence (with PO, Pin Code)	O-46, Chanakya Place Part-2, Janakpuri, New Delhi- 110059
Permanent Address (with PO, Pin Code)	O-46, Chanakya Place Part-2, Janakpuri, New Delhi- 110059
Father's Name	Mr. Brij Kishore
Father's Mobile	9650352083
Date of Birth (DD.MM.YYYY)	01.02.1996
Date of Joining (DD.MM.YYYY)	10.04.2018
Date of Marriage (DD.MM.YYYY)	
Spouse Name (Wife / Husband)	
Location / Bhawan (of Deployment)	JEEVAN TARA BUILDING, PARLIAMENT STREET
Department / Project Name	GOVERNMENT E- MARKETPLACE
Name of Local Project Coordinator	S. SURESH KUMAR
Local Project Coordinator Mobile	
Local Project Coordinator Email ID	addlceo@gem.gov.in
Gender (Male / Female)	FEMALE
Marital Status (Single / Married)	Single
Preferred Location	DELHI
Current Job Location	DELHI
Name of Home Town and the State	DELHI
Mobile Number – 1	8750886084
Mobile Number – 2	
Email ID – 1	kinjalchoudhary327@gmail.com
Email ID – 2	
Educational Qualification – 10th (Year & Marks in %)	2010-11 72%
Educational Qualification – 12th (Year & Marks in %)	2012-13 64%
Qualification (Graduation) – {with %}	B.Com 58%
Full Time / Part Time/ Distance & Year of Passing	Distance 2016
Qualification (Post Graduation) – {with %}	M.Com
Full Time / Part Time/ Distance & Year of Passing	Distance PURSUING
Additional Qualification/ Courses/Diploma – {with %}	
Full Time / Part Time/ Distance & Year of Passing	
Functional Area (Please refer to Annexure – I)	
Technology / Platform (Please refer to Annexure – I)	
Skill Sets / Database (Please refer to Annexure – I)	
Latest Employer (From – To)	Government E – Market Place
Fourth Previous Employer (From – To) (if any)	
Third Previous Employer (From – To) (if any)	
Second Previous Employer (From – To) (if any)	

First Employer (From – To)	Government e-Marketplace (Internship)
Total Experience (In Years + Months)	3 Months
Relevant Experience (In Years + Months)	
Post Qualification (Graduation/MCA) Experience	NA
Current Salary (Gross / Month) in Thousands	
Take Home Salary (as per Bank Statement)	
Passport No. and Validity	
PAN No.	GOWPK3835P
Bank Acc. No.	601610110006889
Bank Name	BANK OF INDIA
Branch	PTI BUILDING, 4 PARLIAMENT STREET, DELHI, NEW DELHI- 110001
RTGS Code	BKID0006889
IFSC Code	BKID0006889
Photograph (Please attach 3 photograph)	
Please attach the copy of Cancelled Cheque or Passbook (Mandatory)	
Blood Group	
Language Known (Hindi/English/Punjabi/Bengali)	Hindi/English
Personal Reference with Mobile No.	NA
Professional Reference with Mobile No.	NA

Sample Signature (Please sing the document very carefully)	Paste your Photograph Here
	

Disclaimer: This communication is of company's representative. The company has the right to keep your information confidential and use it only in providing an employment opportunity for educated, talented and hardworking, candidates/ professionals. If any individual found in sharing an inappropriate and falsification information to company's representative or any third party, or also being involved in receiving or giving any kind of financial help or commission or support in lieu of providing the employment to his/her friends, relatives, colleagues etc. will go through the legal proceedings. The company has the right to take a necessary action. **All the fields are mandatory and please follow the writing rules while filing this information. No fake Experience Please.** SBC Exports Ltd. has the rights to go for any reference check without intimating resource to validate the information.

A. PREVIOUS EMPLOYMENT DETAILS

10) THE DETAILS OF THE UNIVERSAL ACCOUNT NUMBER (UAN) OR PREVIOUS PF MEMBER ID:

UAN

--	--	--	--	--	--	--	--	--	--	--	--	--

OR

PREVIOUS PF MEMBER ID

REGION CODE	OFFICE CODE	ESTABLISHMENT ID	EXTENSION	ACCOUNT NUMBER

11) DATE OF EXIT FOR PREVIOUS MEMBER ID (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y

12) (A) IF SCHEME CERTIFICATE ISSUED FOR PREVIOUS EMPLOYMENT, THEN SCHEME CERTIFICATE NUMBER: _____
(B) IF PENSION PAYMENT ORDER (PPO) ISSUED FOR PREVIOUS EMPLOYMENT, THEN PPO NUMBER: _____**B. OTHER DETAILS**13) INTERNATIONAL WORKER
(PLEASE TICK)

YES	No
	<input checked="" type="checkbox"/>

IF THE REPLY TO (13) ABOVE IS YES, THEN ENTER THE DETAILS IN 13(A), 13(B) & 13(C):

13(A) COUNTRY OF ORIGIN (Please Tick)

INDIA	OTHER THAN INDIA (IF YES, PLEASE MENTION NAME OF THE COUNTRY)

13(B) PASSPORT NUMBER

13(C) PASSPORT VALID FROM

D	D	M	M	Y	Y	Y	Y

To

D	D	M	M	Y	Y	Y	Y

14) EDUCATIONAL QUALIFICATION
(PLEASE TICK)

ILLITERATE	NON-MATRIC	MATRIC	SENIOR SECONDARY	GRADUATE	POST GRADUATE	DOCTOR	TECHNICAL/ PROFESSIONAL
				<input checked="" type="checkbox"/>			

15) MARITAL STATUS
(PLEASE TICK)

MARRIED	UNMARRIED	WIDOW/ WIDOWER	DIVORCEE
	<input checked="" type="checkbox"/>		

16) SPECIALLY ABLED
(PLEASE TICK)

YES	NO
	<input checked="" type="checkbox"/>

IF YES, TICK THE CATEGORY

LOCOMOTIVE	VISUAL	HEARING

17) KYC DETAILS

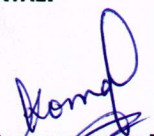
KYC DOCUMENT TYPE	NAME AS ON KYC DOCUMENT	NUMBER	REMARKS, IF ANY
BANK ACCOUNT-1*	Komal	601610110006889	BKID0006016
NPR/AADHAAR	Komal	9278-6631-4147	
PERMANENT ACCOUNT NUMBER (PAN)	Komal	GOWPK 3835 P	
PASSPORT			EXPIRY DATE
DRIVING LICENCE			EXPIRY DATE
ELECTION CARD			
RATION CARD			
ESIC CARD			

* **Mandatory Field (NOTE: BANK ACCOUNT NUMBER (ALONG WITH IFSC CODE) IS MANDATORY. YOU ARE HOWEVER ADVISED TO PROVIDE ALL KYC DOCUMENTS AVAILABLE WITH YOU IN ADDITION TO MANDATORY KYCS TO AVAIL BETTER SERVICES. SELF-ATTESTED PHOTOCOPIES OF THE DOCUMENTS MUST BE ATTACHED WITH THIS FORM.**

C. UNDERTAKING:

- A. I CERTIFY THAT ALL THE INFORMATION GIVEN ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
- B. IN CASE, EARLIER A MEMBER OF EPF SCHEME, 1952 AND/OR EPS, 1995,
- (I) I HAVE ENSURED THE CORRECTNESS OF MY UAN/ PREVIOUS PF MEMBER ID.
- (II) THIS MAY ALSO BE TREATED AS MY REQUEST FOR TRANSFER OF FUNDS AND SERVICE DETAILS IF APPLICABLE FROM THE PREVIOUS ACCOUNT AS DECLARED ABOVE TO THE PRESENT P.F. ACCOUNT. (THE TRANSFER WOULD BE POSSIBLE ONLY IF THE IDENTIFIED KYC DETAILS APPROVED BY PREVIOUS EMPLOYER HAS BEEN VERIFIED BY PRESENT EMPLOYER USING HIS DIGITAL SIGNATURE CERTIFICATE).
- (III) I AM AWARE THAT I CAN SUBMIT MY NOMINATION FORM THROUGH UAN BASED MEMBER PORTAL.

DATE: 17-04-18
PLACE: DELHI


SIGNATURE OF MEMBER

DECLARATION BY PRESENT EMPLOYER

- A. THE MEMBER Mr./Ms./Mrs. HAS JOINED ON AND HAS BEEN ALLOTTED PF MEMBER ID
- B. IN CASE THE PERSON WAS EARLIER NOT A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:
- **(POST ALLOTMENT OF UAN)** THE UAN ALLOTTED FOR THE MEMBER IS
 - **PLEASE TICK THE APPROPRIATE OPTION:**
 - THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE
 - ☐ HAVE NOT BEEN UPLOADED
 - ☐ HAVE BEEN UPLOADED BUT NOT APPROVED
 - ☐ HAVE BEEN UPLOADED AND APPROVED WITH DSC
- C. IN CASE THE PERSON WAS EARLIER A MEMBER OF EPF SCHEME, 1952 AND EPS, 1995:
- THE ABOVE MEMBER ID OF THE MEMBER AS MENTIONED IN (A) ABOVE HAS BEEN TAGGED WITH HIS/HER UAN/PREVIOUS MEMBER ID AS DECLARED BY MEMBER.
 - **PLEASE TICK THE APPROPRIATE OPTION:-**
 - ☐ THE KYC DETAILS OF THE ABOVE MEMBER IN THE UAN DATABASE HAVE BEEN APPROVED WITH DIGITAL SIGNATURE CERTIFICATE AND TRANSFER REQUEST HAS BEEN GENERATED ON PORTAL.
 - ☐ AS THE DSC OF ESTABLISHMENT ARE NOT REGISTERED WITH EPFO, THE MEMBER HAS BEEN INFORMED TO FILE PHYSICAL CLAIM (FORM-13) FOR TRANSFER OF FUNDS FROM HIS PREVIOUS ESTABLISHMENT.

DATE:

SIGNATURE OF EMPLOYER WITH SEAL OF ESTABLISHMENT