



Affix Your Photograph Here

CANDIDATE INFORMATION FORM

1. Name (Block Letters- As specified on Passport or Pan Card):

First Name: Bruce

Middle Name: Thomas

Last Name : Wane

2. Permanent Address:

3.1 Street Address: Greenland City: Alandi 3.3 State: Maharashtra

3.4 Zip Code: 412105 3.5 Country: India

3. Current Address:

3.1 Street Address: Shreeraj Apartments City: Pimpri 3.3 State: Maharashtra

3.4 Zip Code: 411102 3.5 Country: India

4. Date of Birth: 17/01/2005

5. Age: 19

6. Gender: Male

7. Passport: 1225 8. Mobile: 8261074745 9. PAN No.: GAPU3344F

10. Visa: 8554FES45

11. Email ID: rohitpatil@gmail.com

12. Name of Emergency Contact: 8889977885

13. Emergency Contact's Number: 9923256894 14. Available for Relocation:



15. EDUCATIONAL QUALIFICATION: (Starting from recent)

Sr No.	Name of the School/ University	Qualification	% or CGPA	Pass out Year
1	MIT Acadmey of Engineering	BTech	9.1	2025
2.	Government Polytechnic	Diploma	8.7	2022

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15. Details of any important training undergone:

Program	Contents	Organized By	Duration
AWS Practitioner	Cloud services	AWS Academy	1 month

16. Please list the technical or professional certification you completed

Sr. NO	Certification	Duration
1	Oracle SQL	15 hours

17. Details of Family Members:

Relation	Occupation/Profession	Resident Location
Father/ Mother	x	Pune
Brothers	y	Pune
Sisters	z	Pune
Spouse		
Children		

18. References: (Min 2)

Note: Write References in case of:

- 1. Student: Faculty**
- 2. Employment: Immediate reporting Authority, Managers, Team Leads etc.**
- 3. Institute, SEED, CDAC: Faculty**

Name	Designation	Contact No
Team Leads	Mr. ABC	9689567477



Signature