

EMPLOYMENT FORM

PERSONAL INFORMATION

TITLE (MR/MS/DR)	CONTACT NOS. (MOBILE & LANDLINE)
FIRST NAME	8790190842
MIDDLE NAME Suni Reddy	Sunitreddy. gl @ gmail. Com
LAST NAME	H.No; 9-1-34/30/56/2,
Gujjula	pent house, bapughout
FATHER'S NAME & Contact No.	Saibaba temple voad
· Venkat Reddy MARITAL STATUS Single	LANDMARK: PERIOD OF STAY (FROM – TO): 2015 - 2016
HUSBANDAWIFE'S NAME & Contdct No.	PERMANENTHOME ADDRESS: H.NO; 1-79
EMERGENCY CONTACT: NAME & RELATIONSHIP. VEN KOL REOLD Y CONTACT NO.: 9705144648 CONTACT ADDRESS: (VI) DILONON PUY	(vi) Dilawaypur (mb) Damercharla (bist) Nodgorda
(MD) Damerchar 19 (Dist) Walgonda	LANDMARK: PERIOD OF STAY (FROM - TO): 1991 - 2016

ACADEMIC INFORMATION - EDUCATION & LANGUAGES

Qualification	DEGREE & SPECIALIZATION	Institute/University	LOCATION	Start year	End year	GRADE A MARKS A GPA
Secondary	SSC	2PH School	Dila -	2005	2006	72
Higher Secondary	Intermediate	Junior colle	Miryal-guda	2006	2008	63
Graduation	B. tech	JNTU Hyde rabad	Miryal- guda	2008	8012	64
Post Graduation			1000			
SSN No. if studied of	Dverseas		Side =			



SHORT TERM COURSES		· · · · · · · · · · · · · · · · · · ·	
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EMPLOYMENT INFORMATION – PRESEN	IT & PACT		
	VI GET AST		
CURRENT EMPLOYMENT			
NAME OF EMPLOYER	REASONS FOR LEAVING	SALARY DRAWN	
EMPLOYEE CODE:	DESIGNATION	ADDRESS OF EMPLOYER	
20,22,0002.	SECIOI WILLIAM	ADDITION OF LAW ESTERN	
PERIOD OF EMPLOYMENT (FROM – TO)	CONTRACT OR FULL TIME EMPLOYMENT		
DD/MM/YY			
HR MANAGER'S NAME AND CONTACT NO.:			
HR MANAGER'S NAME AND CONTACT NO.:	REPORTING MANAGER'S NAME AND CONTACT NO.:	CONTACT NO. (LANDLINE)	
	No.		
PAST EMPLOYMENT		· ·	
NAME OF EMPLOYER	REASONS FOR LEAVING	SALARY DRAWN	
EMPLOYEE CODE:	DESIGNATION	ADDRESS OF EMPLOYER	
DEDICO OF PUBLICATION FROM			
PERIOD OF EMPLOYMENT (FROM – TO) DD/MM/YY	CONTRACT OR FULL TIME EMPLOYMENT		
BB/WWW T			
HR MANAGER'S NAME AND CONTACT NO.:	REPORTING MANAGER'S NAME AND CONTACT	CONTACT NO. (LANDLINE)	
	NO.:	•	
NAME OF EMPLOYER	REASONS FOR LEAVING	SALARY DRAWN	
EMPLOYEE CODE:	DESIGNATION	ADDRESS OF EMPLOYER	
PERIOD OF EMPLOYMENT (FROM - TO)	CONTRACT OR FULL TIME EMPLOYMENT		
DD/MM/YY			
HR MANAGER'S NAME AND CONTACT NO.:	REPORTING MANAGER'S NAME AND CONTACT	CONTACT NO. (LANDLINE)	
	NO:	CONTACT NO. (LANDLINE)	



NAME OF EMPLOYER	REASONS FOR LEAVING	SALARY DRAWN
EMPLOYEE CODE:	DESIGNATION	ADDRESS OF EMPLOYER
PERIOD OF EMPLOYMENT (FROM – TO) DD/MM/YY	CONTRACT OR FULL TIME EMPLOYMENT	
HR MANAGER'S NAME AND CONTACT NO.:	REPORTING MANAGER'S NAME AND CONTACT NO.:	CONTACT NO. (LANDLINE)

COMPENSATION (FIGURES ON ANNUAL BASIS) & NOTICE PERIOD

BASIC	COMPANY CAR	OTHER 2	
HRA/CLA	FUEL &	OTHER 3	
	MAINTENANCE		
MEDICAL	FURNISHINGS	PROVIDENT FUND	
LTA	BONUS/INCENTIVES	SUPERANNUATION	
CONVEYANCE	LOANS	GRATUITY	
SPL	OTHER 1	TOTAL (CURRENT COST TO	
ALLOWANCE		COMPANY)	
EXPECTED	Official Notice Period	If selected, would you be able to	
CTC	at Current	shorten the notice period? Do you	
	Employment	have a buy out option?	

PASSPORT & TRAVEL INFORMATION

Nationality: Indian			
In case you do not hold a valid Indian passport, please con	firm and specify work permit details:		
Are you willing to travel?			
yes			
Are you willing to sign the Overseas Travel Agreement in c	ase you are required to travel?		
ye	2		
Do you posses valid visa for any country?			
No			
Have you ever been rejected visa for any country? If yes, pleas	e provide information		
No			
PASSPORT NO. P0709186	DATE OF ISSUE 12/04/2016	DATE OF EXPIRY	11/04/2021



GENERAL INFORMATION

Are you willing to work in shifts if	red?	
	Yes	
Do you have any relatives employ	y vERITY? If yes, give details	
	No	
Have you ever been arrested or c	cted of any criminal charge? If yes give details.	
	No	
Have you committed any act or be	ndirectly involved in transactions which led to or resulted in any legal action against you? If yes give details	
	No	
Have you ever declared bankrupt		
	No	

LANGUAGES

WRITE (HIGH/MEDIUM/LOW)	READ (HIGH/MEDIUM/LOW)	SPEAK (HIGH/MEDIUM/LOW)
High	High	High
High	High	High
Medium	Medium	Medium
	High 14gh	High High

FAMILY INFORMATION

SPOUSE	DATE OF BIRTH	
NAME		
CHILD NAME	DATE OF BIRTH	MALE /FEMALE .
CHILD NAME	DATE OF BIRTH	MALE / FEMALE
CHILD NAME	DATE OF BIRTH	MALE / FEMALE



I CONFIRM THAT ALL THE INFORMATION PROVIDED HEREIN IS PROVIDED VOLUNTARILY AND IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND ACCURATE.

I HEREBY GIVE VERITY KNOWLEDGE SOLUTIONS PVT LTD, ITS BRANCHES, SUBSIDIARIES AND AFFILIATES THE RIGHT TO VERIFY THE INFORMATION PROVIDED ABOVE AND ANY EMPLOYMENT DATA OR ANY OTHER DATA SUBSEQUENTLY PROVIDED TO THE VERITY FOR THE PURPOSES OF DETERMINING THE SUITABILITY OF MY EMPLOYMENT AND QUALIFICATIONS, INCLUDING BUT NOT LIMITED TO CHECKING FOR ANY EXISTING OR POTENTIAL CONFLICTS OF INTEREST OR ANY OTHER RESTRICTIONS WHICH MAY OTHERWISE RESTRICT OR PREVENT MY EMPLOYMENT WITH THE VERITY, AND MAY COVER, AMONGST OTHERS, BACKGROUND CHECKS, EDUCATIONAL AND PROFESSIONAL QUALIFICATIONS, EMPLOYMENT AND PERSONAL HISTORY/REFERENCES, CREDIT/BANKRUPTCY SEARCHES, CRIMINAL RECORDS AND MANDATES/EXTERNAL DIRECTORSHIPS.

I UNDERSTAND AND ACCEPT THAT IF I CHOOSE NOT TO PROVIDE ANY PERSONAL DATA/INFORMATION AS REQUESTED BY THE VERITY OR IN ANY WAY PREVENT THE VERITY FROM CARRYING OUT ANY PART OF ITS VERIFICATION PROCESS OR IF ANY ANSWERS OR STATEMENTS MADE OR PROVIDED UPON MY APPLICATION FOR EMPLOYMENT OR SUBSEQUENT THERETO ARE FALSE, OR ARE PROVEN TO BE FALSE IN THE COURSE OF THE ABOVE MENTIONED VERIFICATION PROCESS, I MAY BE DENIED BENEFITS, PROMOTIONS, TRANSFERS AND/OR EMPLOYMENT OR CONTINUED EMPLOYMENT AS A RESULT OF MY DECISION AND I SHALL NOT BE ENTITLED TO MAKE ANY CLAIM AGAINST THE VERITY FOR ANY DAMAGES, COMPENSATION OR REDRESS WHATSOEVER.

I ALSO GIVE MY CONSENT TO UNDERGO THE MEDICAL FITNESS TEST TO BE CONDUCTED BY A COMPETENT MEDICAL AUTHORITY, AS PRESCRIBED BY VERITY KNOWLEDGE SOLUTIONS PVT. LTD.

SIGNATURE:

DATE: 09/11/2016