

CANDIDATE DECLARATION FORM

ONICRA
WE SECURE TRUST

Note: All fields are Mandatory

Registration ID	Employee ID	Candidate Date of Joining: (DD/MM/YY)*
	CTID-4779	03/05/2018

Candidate Personal Information*

Full Name (First, Middle, Last): BIRRU VIJAY KUMAR

Father's Name: BIRRU YADAGIRI

Gender: Male ☒ Female ☐ Nationality: Indian

Mobile Number: 7306034201

Landline Number: _____

Former Name / Maiden Name (if applicable): _____

Aadhaar No: 664683612590

Candidate Date of Birth: 15/11/1992

Single ☒ Married ☐ Email id: vijaykumar.birru@gmail.com

Address Details: (Please provide address proof in favor of your current address*)

Candidate Current Address:

House no./Bldg no./Flat No: Room 102 Street/Lane/Road: Raghuvir 11A, opposite
OPP: Shani Mandir, DHIGHA, NAVI MUMBAI

Area/Locality/ Sector: DHIGHA Village/Town/City: NAVIMUMBAI

State: MAHARASHTRA Pincode: 400708 Landmark: OPP: Shani Mandir

Stay From: 15/05/2018 To: Till date House Type: Owned ☐ Rented ☒

Alternate Contact No: 9916162595

Candidate Permanent Address:

House no./Bldg no./Flat No: Jan gaon Street/Lane/Road: Jyoti Sarees, OPP
BALAGI BAR, SURYA PETH ROAD, JANGAON

Area/Locality/ Sector: _____ Village/Town/City: JANGAON / WARANGAL

State: TELANGANA Pincode: 506167 Landmark: OPP: BALAGI BAR

Stay From: 04/04/2014 To: Till date House Type: Owned ☒ Rented ☐

Alternate Contact No: 9347544851

Address History*

Instructions: 1. We require your address history. 2. Kindly include all addresses that you have stayed at excluding current address & permanent Address as these details are provided above.

From (dd/mm/yy) To (dd/mm/yy)	Address Details* (House Number, Street, address, location and Prominent Landmark)	City*	State*	Country	Pin code*	Family Member /Neighbor's Contact Number*
May 2014 - April 2018	Plot No: 278, Bhavani Nagar, Kapra, ECIL, Hyderabad	HYD	TG	IND	500062	Govind 909215506
1995 - 2014	4-5-59/12, opp: Preston School, Jangaon, Warangal	Jangaon	TG	IND	506167	9347544851

Educational Qualification*

Instructions: 1. Please attach clear copies (front & back) of the following documents relevant to your entries in the form; 2. Please furnish the Education Mark sheets/Certificates (wherever applicable); 3. Kindly provide college name for educational qualification.

a. 10th/Equivalent; b. 12th/Equivalent; c. Graduation, Post Graduation mark sheets & Certificates; d. Professional/Other degree/diploma certificates.

Qualification*	Degree*	College Name & Location*	University Name & Location*	Duration of Course*		Full Time* Correspondence or Part Time*	CGPA* (%)	ID/Roll No.*	Supporting Doc Available* (Final Year Mark sheet, Provisional Certificate and Degree)
				From* (mm/yy)	To* (mm/yy)				
10th / Equivalent		Sri Krishnaveni Talent School,	State Board, Jangaon	07/03/08	03/08	Full	81%	1064597	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>
12th / Equivalent		Sri Chaitanya college	State Board, TG	05/08	05/10	Full	88%	10142232	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>
Graduation		GURUNAVAT eng college	JNTUH, HYD	06/10	04/14	Full	69%	1050140	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>
Post Graduation (PG)									Yes <input type="checkbox"/> / No <input type="checkbox"/>
Other Qualification									Yes <input type="checkbox"/> / No <input type="checkbox"/>

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Note: All fields are Mandatory. Professional Certification*							
Institute's Name & Address*		Duration of Course*		Full Time (FT) or Part Time (PT)*		ID / Roll No.*	
From (mm/yyyy)		To (mm/yyyy)					
1							
2							
3							
Employment History* Instructions: 1. Verification for current employment will be carried out post joining a new company or once authorization is received from client/candidate to initiate verification; 2. Please provide past years experiences/previous employment details; 3. Please furnish relevant documents (Offer Letter, Appointment Letter, Experience Certificate, Pay slips, Relieving Letter) for all entries listed below; 4. Please provide agencies details, in case temporary or contractual employment. 5. If you have more than 1 tenure in the same company. Fill new box. 6. Kindly attach relevant PF/ ESIC/ Form 16 / Salary slip document.							
Employment 1: Name of the Employer/Company: <u>Microspark Software Solutions Pvt Ltd</u>				HR/Company Landline No: <u>040-30193666, 040-48536666</u>			
Address of the Employer/Company: <u>H.No: 1-11-251/1B, Immoxe Building, Behind Shopper stop, Begumpet, Hyderabad. 500016.</u>				HR/Company Contact Person Name: <u>Raghava Reddy Karri</u> <u>040-48536666 ext: 377</u>			
Whether employment is of permanent, temporary or self employed: <input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Self Employed				Company Website Address: <u>www.microspark.com</u>			
Job Title/Designation: <u>Devops Engineer</u>		Employee ID (if applicable): <u>MS14709</u>		PF/UAN (if applicable): <u>-</u>			
Date of Joining: <u>04/06/2014</u>		Company TAN (if applicable):		Salary Fixed (p.a): <u>35300/-</u>		Variable (p.a): <u>-</u>	
				Other Benefits: <u>-</u>		Total (p.a): <u>35,300</u>	
Date of Relieving: <u>30/04/2018</u>		Company PAN (if applicable):		Reason for Leaving: <u>career growth & salary hike</u>		Supervisor name & contact no.: <u>Prabirakar</u> <u>040-48536666, Ext: 318</u>	
Employment 2: Name of the Employer/Company:				HR/Company Landline No:			
Address of the Employer/Company:				HR/Company Contact Person Name:			
Whether employment is of permanent, temporary or self employed: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Self Employed				Company Website Address:			
Job Title/Designation:		Employee ID (if applicable):		PF/UAN (if applicable):			
Date of Joining:		Company TAN (if applicable):		Salary Fixed (p.a)		Variable (p.a)	
				Other Benefits		Total (p.a)	
Date of Relieving:		Company PAN (if applicable):		Reason for Leaving:		Supervisor name & contact no.:	
Employment 3: Name of the Employer/Company:				HR/Company Landline No:			
Address of the Employer/Company:				HR/Company Contact Person Name:			
Whether employment is of permanent, temporary or self employed: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Self Employed				Company Website Address:			
Job Title/Designation:		Employee ID (if applicable):		PF/UAN (if applicable):			
Date of Joining:		Company TAN (if applicable):		Salary Fixed (p.a)		Variable (p.a)	
				Other Benefits		Total (p.a)	
Date of Relieving:		Company PAN (if applicable):		Reason for Leaving:		Supervisor name & contact no.:	
Employment 4: Name of the Employer/Company:				HR/Company Landline No:			
Address of the Employer/Company:				HR/Company Contact Person Name:			
Whether employment is of permanent, temporary or self employed: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Self Employed				Company Website Address:			
Job Title/Designation:		Employee ID (if applicable):		PF/UAN (if applicable):			
Date of Joining:		Company TAN (if applicable):		Salary Fixed (p.a)		Variable (p.a)	
				Other Benefits		Total (p.a)	
Date of Relieving:		Company PAN (if applicable):		Reason for Leaving:		Supervisor name & contact no.:	

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<small>Note:</small> All * fields are Mandatory.																																					
Employment 5: Name of the Employer/Company:			HR/Company Landline No:																																		
Address of the Employer/Company:			HR/Company Contact Person Name:																																		
Whether employment is of permanent, temporary or self employed: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Self Employed			Company Website Address:																																		
Job Title/Designation:		Employee ID (if applicable):		PF/UAN (if applicable):																																	
Date of Joining: <div style="display: flex; justify-content: space-between;"> <div>DD MM YY</div> <div>DD MM YY</div> </div>		Company TAN (if applicable):		<div style="display: flex; justify-content: space-between;"> <div>Salary Fixed (p.a)</div> <div>Variable (p.a)</div> <div>Other Benefits</div> <div>Total (p.a)</div> </div>																																	
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				Supervisor name & contact no.:																																	
References*																																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Details</th> <th style="width: 25%;">Reference 1*</th> <th style="width: 25%;">Reference 2*</th> <th style="width: 25%;">Reference 3*</th> </tr> </thead> <tbody> <tr> <td>Name</td> <td>Mahendras.K</td> <td>Lalith Kumar</td> <td></td> </tr> <tr> <td>Company Name</td> <td>Microspark Software Solutions Pvt. Ltd, Hyd.</td> <td>Microspark Software Solutions</td> <td></td> </tr> <tr> <td>Contact No.</td> <td>9676250150</td> <td>9948751017</td> <td></td> </tr> <tr> <td>Email Id</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Designation of the Referee</td> <td>Software Engineer</td> <td>Software Engineer</td> <td></td> </tr> <tr> <td>Years you have know the Referee</td> <td>2 years</td> <td>1 1/2 years</td> <td></td> </tr> <tr> <td>You know the referee (Personally/Professionally)</td> <td>Professionally</td> <td>Professionally</td> <td></td> </tr> </tbody> </table>						Details	Reference 1*	Reference 2*	Reference 3*	Name	Mahendras.K	Lalith Kumar		Company Name	Microspark Software Solutions Pvt. Ltd, Hyd.	Microspark Software Solutions		Contact No.	9676250150	9948751017		Email Id				Designation of the Referee	Software Engineer	Software Engineer		Years you have know the Referee	2 years	1 1/2 years		You know the referee (Personally/Professionally)	Professionally	Professionally	
Details	Reference 1*	Reference 2*	Reference 3*																																		
Name	Mahendras.K	Lalith Kumar																																			
Company Name	Microspark Software Solutions Pvt. Ltd, Hyd.	Microspark Software Solutions																																			
Contact No.	9676250150	9948751017																																			
Email Id																																					
Designation of the Referee	Software Engineer	Software Engineer																																			
Years you have know the Referee	2 years	1 1/2 years																																			
You know the referee (Personally/Professionally)	Professionally	Professionally																																			
GAP Identification: A gap can be defined as: a.) You left company A and joined company B. The time gap between date of relieving from company A and date of joining of company B was more than 3 months. b.) You joined a company after completing your higher studies. Time gap between completion of your course and joining a company was more than 3 months.																																					
From (dd/mm/yy) To (dd/mm/yy)		Reason for GAP		Provide address where you stayed during the GAP																																	
Criminal Details*: Have you ever been charged or convicted for any criminal offence in India or abroad?																																					
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		If yes, please provide details:																																			
Identity Proof*:																																					
Instructions: 1. Please follow the below instructions for each separate document relevant to your entries in the form: 2. Please provide any of the below mentioned identity proofs a). Please provide clear copy (front) of your PAN card. e). Please provide clear copy (front & back) of your Social Security Number b). Please provide clear copy of your passport. (MRZ code of your passport should be very clear) f). Please provide clear copy (front & back) of your Voter ID card. c). Please provide clear copy (front & back) of your Driving License. d). Please provide clear copy (front & back) of your Aadhaar enrolment No.																																					
PAN Card No. <div style="border: 1px solid black; padding: 2px;">BMIPB3643M</div>		Passport No. <div style="border: 1px solid black; padding: 2px;">M7469989</div>		Aadhaar No. <div style="border: 1px solid black; padding: 2px;">664683612590</div>																																	
Voter ID No. <div style="border: 1px solid black; padding: 2px;"></div>		Social Security Number: <div style="border: 1px solid black; padding: 2px;"></div>		Aadhaar Acknowledgement Slip Date and Time <div style="display: flex; justify-content: space-between;"> <div>DD MM YY</div> <div>HH MM SS</div> </div>																																	
Driving License No. <div style="border: 1px solid black; padding: 2px;">TS10820170002289</div>																																					
Authorization/ Declaration and Undertaking:																																					
I hereby authorize ONICRA Credit Information Company Limited (Company), and/or any of its affiliates acting on its behalf, to verify all the information/data/credentials filled in and reproduced in this Candidate Declaration Form, valid and complete to the best of my knowledge, for procurement of Investigation/Verification Report.																																					
I hereby give my consent and authorize to the bearer of this Candidate Declaration Form to access and verify my previous records and information; I further expressly accord my consent, indemnify and hold harmless all the persons/entities/organizations/persons providing and obtaining verification information from any liability whatsoever for the purpose of this verification report.																																					
I have read, understood and consent to these statements listed above and I consent to undertake the services as proposed.																																					
Full Name*: BRRU VIJAYKUMAR		Signature*: 		Date*: <div style="border: 1px solid black; padding: 2px;">09 05 2019</div>																																	
<small>Onicra Confidential</small>																																					