## **Background Verification Form**

Synechron Employee Code:

Residing Since (Mandatory): {MM/YYYY}

Employee Joining Location: Cherona

PERSONAL DETAILS	16				
Name of Applicant First ー Vis 舟 ) Middle - Surname - 〕					
Maiden Name:					
Have you ever been known name?	by another	☐ YES ☑ If Yes, please	NO write the other name:		
Place of Birth: P When		Date of Birth	(dd/mm/yy): 25/07/2991		
Sex: Male		Nationality: Indian			
Father's Name -	Passport No.	25	SSN No. (Mandatory for US address)		
D. Chiranjeevelu. Home Phone:	Office Phone:		Mobile: 8367250590		
Permanent Address D. V	iax, slo	D. chisan-			
City: Putuer		State: Andra Poradesh			
Pin Code: 517584		Nearest Landmark:			
Name of the contact persor	at the address:	D. Sant	a Kumasii		
Relationship of contact pers	son: Mother				
Landline No.:			Mobile No.: 9962966002		
Nature of Location: Rented,	Owned/Others	Preferred t	Preferred time of the day for conducting the		

verification, if any:

Residing Till (Mandatory): {MM/YYYY}

Current Address (Complete address to be me F7, East Kamakati Nagas Valasararakkam, cheni	n, 38d Gross Street
City: Chemnai	State: Tamil Nade
Pin: 600087	Nearest Landmark:
Contact Person at the address:	ta Kumasi
Relationship of contact person:	
Landline No.:	Mobile No.: 996 2966002
Nature of Location: Rented/Owned/Others	Preferred time of the day for conducting the verification, if any:
Residing Since (Mandatory): {MM/YYYY}	Residing Till (Mandatory): {MM/YYYY}

Name of Degree PG/UG/ Diploma	Mention fulltime or Part time	Name & Address of University its affiliated	Name & Address of School/College/Institute	Course Start Date (MM/ YYYY)	Course End Date (MM/ YYYY)	Roll Number/Registratior Number/Exam Seat number
108h	Full Time		Holy Gross 43, 12t main groad Vani Nagogi, SVS Nago Valasonavakkam, CH-87		2007	931050
120h	Fall sime		Holy GOSS 43, 1st main Godd Vani Nagar, SVS Nagar Valasaravakkam, CH 83	z 2008	2009	679978
B.F	Full Time	unistenzila	Hindusthan universil Rajin Gandi Salai Padion, chennai-603103 Tamil Nadu	2,009	2013	0900408092

Details	Disservices	GAP Clarification	
Details	Duration	GAP Clarmication	
NA	NA	NA	
AP Between <u>Education</u>	to Education: If yes, then p	rovide below details and if No, mention "NA"	
ote - Only If complet	te break between educat	tion. Year down/Fail/ATKT is not a GAP	
Details	Duration	GAP Clarification	
NA	NA	NA	
	ent to Employment: If yes, the base of the more than one month	hen provide below details and if No, mention "No	
Details	Duration	GAP Clarification	
NA	NA	NA	
IN U	1,10		

Synechran

If you are still employed yet to be relieved.	in this organization, ple	ase fill in the last working	date as still employed or	
Note: Please mention a	ll the employments in the	last 5 years starting from	the latest employment)	
Employer 1 (prior to Synechron)	Employee ID IW1-61168	DOJ (From dd/mm/yy) 05/66/2019	LWD (To dd/mm/yy) 23/01/2023	
Full Address & Name of Inter Webstan No. 268, Januara 161	Company 1echnologies Nehowki), Ekkadu Harr CH -320	Phone Number		
City Chenmai	State State Nadu	Country India	Postal Code 600032	
Please specify if compar	y is shut down:	Reason of Leaving:	en grouts	
Designation:		Final Salary (Annual CTC):		
Software Test Engineer Supervisor Name & Title		HR Manager Name Vijaya Kumagi. K		
Supervisor 's Phone Number & Official Email ID		HR Manager Phone Number 915 916 3063	Ser & Official Email ID	

Employer 2	Employee ID	DOJ (From dd/mm/yy)	LWD (To dd/mm/yy)	
Full Address & Name of Company		Phone Number		
City	State	Country	Postal Code	
Please specify if company is shut dow	'n:	Reason of Leaving:		
Designation:		Final Salary (Annual CTC):		
Supervisor Name & Title		HR Manager Name		
Supervisor 's Phone Number & Official Email ID		HR Manager Phone Number & Official Email ID		

Synechran

Employer 5	Employee ID	DOJ (From dd/mm/yy)	LWD (To dd/mm/yy)	
Full Address & Name of Com	pany	Phone Number		
City	State	Country	Postal Code	
Please specify if company is shut down:		Reason of Leaving:		
Designation:		Final Salary (Annual CTC):		
Supervisor Name & Title		HR Manager Name		
Supervisor 's Phone Number & Official Email ID		HR Manager Phone Number & Official Email ID		

I hereby declare that the information given in this application is true and correct to the best of my knowledge and belief. In case any information given in this application proves to be false or incorrect, I shall be responsible for the consequences.

Name in Capital Letters: 1.VI3AY

Place: Chennai

Date: 13 02 2023

(Signature of Applicant)