Letter of Authorization

*(To be manually signed)*

**To whomsoever it may concern**

I s/o/d/o/w/o \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ resident of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , being the undersigned, understand that IGATE Corporation & its subsidiaries, (hereinafter “IGATE Global Solutions Ltd” the expression which unless repugnant to the context shall mean and include its affiliates, successors and permitted assigns) may use and/or assign outside agency(ies) to verify and validate the information I have provided including but not limited to my previous and current employment details, my personal background, criminal conviction records, professional standing, work history and both school and professional qualifications, personal references ( the “Information”).

I understand that agency(ies), as may be assigned from time to time by IGATE Global Solutions Ltd may obtain as it may deem appropriate from various sources, the said Information without any further notice to me.

I hereby authorize, without reservation, any individual, corporation and/or other private or public entity to furnish IGATE Global Solutions Ltd, its client(s) and the outside background agency the said Information.

I unconditionally agree to defend, release, indemnify and hold harmless any individual, corporation, or private or public entity from any and all causes of action that might arise from furnishing said Information to IGATE Global Solutions Ltd and/or in turn to any client of IGATE Global Solutions Ltd and the outside agency(ies) and/or IGATE Global Solutions Ltd and/or any client of IGATE Global Solutions Ltd that they may request, pursuant to release of this Letter of Authorization.

I also understand that by issuing this Letter of Authorization, I am merely providing necessary support to IGATE Global Solutions Ltd and/or IGATE Global Solutions Ltd’s client(s) to verify the said Information and under no circumstance(s) would my giving this Letter of Authorization, entitle me to an offer or continuance of employment/assignment with IGATE Global Solutions Ltd and/or its clients.

This Letter of Authorization and release, in original, faxed or photocopied form, shall be valid for this and any future reports and updates that may be requested.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name in Block Capitals: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth (dd/mm/yy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Note: The above Authorization Form to be manually signed by the applicant**