LYSTEN GLOBAL PHARMACEUTICAL PVT LTD. APPLICATION FOR EMPLOYMENT

HEAD OFFICE: MUMBAI

AFFIX SIGNED PHOTOGRAPHY HERE (PASSPORT SIZE)

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| resulting NC | c. Speak only : 4 \ C. Speak only : 4 \ Height 5 9 13. Weight 56 Kg. General Condition of Good Your Health | Region: Pune Hindu Widowed Divorced Own House Board Narathi | 04.Permanant Address: SPANE REOVE Prin Code: 05. Name Of Father/Husband: SUPL Namdeo Jande: 06.Person to be notified: (In Case Of Emergency) SUPN Namdeo Survey & Address: Same of Telephone: 954534 (In Case Of Emergency) SUPN Namdeo Survey & Above 1493 | 01. Post Applied For: Medical Representative. 02. Full Name (Underline Sumame): AKShow Suni) Lande 03. Present Address: At post Landowadd manchean Telephone: 4422947112 tawko Ambegaon dist-Rune Email tot oxstraybride quel Pan No. Pan No. AN JOLES 49 R. |

| E D U C | 19. Degree / Dip Certificate(HIGI DIPLOMA DEG | HEST | Class / Divn. | Univer Colleg Scho | ge / | Years Attended From To | Year Attended From To | Main Subject / Subjects Specialised |
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| ., | 22. Relation | Nam | е | | DOE | 3 | AGE | Dependent |
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| | Child 23 Do you kn | ow an | vone in th | nis Organis | ation | No 🖸 | Yes | |
| G | Are they related to you No Yes | | | | | | | |
| E | 24. Have you By this Organ | been Ir isatior | nterviewe n before | | | No 🖸 | Yes | |
| E R | E 25. Masimum Period Vi | | | | illege | Tow | n 📈 🗌 | Metro Name |
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| | Significant | nt contribution in your present or most recent job | | | | | | | | |
| | Regular calls with consistent business | | | | | | | | | |
| | J | of | 70000 | mont | h· | | | | | |
| | 30. Can we | e refer to your : | No 🔲 | Yes (Note: No | reference will be made | e Without your prior consent) | | | | |
| | 31. Our jobs are transferable anywhere in India. Are you willing to work anywhere in India No Yes Yes | | | | | | | | | |
| | | expectation: 6000 | | w soon can you join elected ? | 1: 25 th o | U - 2017. | | | | |
| R E F E | 34. Please give name and address of two persons to whom we can refer(Persons mentioned should hold responsible positions and should not be relatives) | | | | | | | | | |
| RE | Name | Address | Occupa | tion | Years of A | equaintace | | | | |
| N C E | Isanju Manda | r fure | ABM | 910 | 8090464 | 1 year - | | | | |
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DECLARATION:

(a) I herby declare that the foregoing statement and answers in this application form have been given by me after fully understanding the questions and the same are true. Full and coplete in every particular, manner to the best of my knowledge and that I have not withheld any information.

(b) I do hereby agree and declare that if the company offerme employment, these statements and answers and this declaration will be the basis of the contract of employment between the company and me and that if any of these statements of answers anr found to be untrue, and / or incomplete or if any information is found to have been willfully withheld by me, I herby aree that the company has the right to terminate my service without any compensation, on the basis of the contract of employment being ab-initio void.

Date: 26 h 0 ct 2017
Place: punl

Applicant's Signature

Julcano

LYSTEN GLOBAL PHARMACEUTICAL PVT LTD

APPLICATION FOR EMPLOYMENT

HEAD OFFICE: MUMBAI

BANK ACCOUNT PARTICULARS FOR DIRECT CREDIT

Employee Code Name Division HQ 106/1993 JPL5349R. Date of Birth PAN NO. (Pl attach Xerox Copy)

Please credit my salary and other payments into bank account as per following details.

Bank Name : AXIS Bank :

Branch Address : Manchao :

Account No (Xerox copy of the Cheque Leaf is to be attached which is MANDATORY)

Date: 26 / 10 2017

P. S.: No payment Will be made, be made, if photocopy of cheque leaf is not attached.

> Its' compulsory to provide each and every detail mentioned above to process your Impress cash and Salary in your bank account. Please leave the employee code blank which will be file at corporate.

> Important : Please send this Bank Account Particulars form along with New Joining Report.

Interview Assessment Form

| Name of Car Location: Date: 12 | The didn't compared to the com | nis section to b | e complete Pe So 1: | ed by the members of position considered for the co | of the interview or: ME oultants References st Joining Perio | ing panel ince / Others: | 17_ |
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| Contact No. | -989 | 5083 | 83 | 93. con | tact No. :- | 879 | 328 161 |
| ontact No. | - 78 | 0005 | 83 | 7 5. Con | tact No. :- | 8/9 | 528 |