EMPLOYEE MEDICAL SELF DECLARATION FORM

Please specify if you're having health issue: YES/NO NO If yes, please specify in detail:		
Suffering from any chronic diseases: YES/NO _ NO		
If yes, please specify in detail:		
Undergoing any Medical Treatment: YES/NO _ <u> </u>		
If yes, please specify in detail:		
I, Paulan Verma of AT (Applicant's Name)	Post Bhayowa Applicant's Address)	di, Betul-46044
Agree as an applicant being a fit and proper person and able to perform I do sincerely declare that the contents of this form are true and corre		7
and no information concerning my past or present state of health has incorrect or misleading answer or material omission which relates to	been withheld. I un	derstand that any wilfully
make me ineligible for employment, or if employed, liable to discip understand that this pre-employment health declaration may form pa	linary action which	ns before mentioned may may include dismissal.
also voluntarily and freely consent to sharing of the above personal i Iarquis Technologies Pvt. Ltd	nformation in relatio	on job employment to
oplicant's signature	_Date_~6fe	b-2023.