Candidate Information Form

PERS	ONAL DETAILS	First A	MIT
ame of Applicant: Surname RANJAN M	iddle	7.00	
ate of Birth (dd/mm/yy): 30 17 1995			
ex: MALE			
Father's Name: HARKIT YNDAV	or hillow C	C/04/62489	18289071832
Home Phone: 62 87 53 Office Phone:	Woolle: 8	860-1037	
EMPLOYMENT RECORD: Starting with your present or most reco	ent employer, please list	last 2 employments. W	then listing consulting or
EMPLOYMENT RECORD: Starting with your present or most record temporary assignments, under "Employer", state the name Complete and accurate dates (month/year) must be provide		nporary agency that pla	
EMPLOYER 1 (Current): TETEYSIG NETWORK PV+ L++	Employee Id: TNPL125598	From (mm/yy): Alril 2019 N	To (mm/yy): UV l9n/le/ 202/
Street Address: The FSRST A SLOC 603, 606 Sehind Keshave The Fixst Avenue of City: A Homedolad State: Grujar AT	K" - Uffice No -	Employer's Phone No.: 079-29707526	Remuneration/Salary: 25000 K
City: A Hame do lad State: GUJAR AT	Country: Incl	Postal	
Job Title: RIDT Engineer	Reason for leaving:	Due to Covi	z/-19 Ma
Employment Status: (Please check the relevant box)	Supervisor's Details:		
₩ Full Time	Name:	ABUAY (
Contract /Through Outsourcing Agency	Title:	RF-Woling	2 tox
Outsourcing Agency Details:	Phone No.: E-mail id:	96hay.94	pta@ teseysia
Name:	(Preferably official) HR Manager's Details:		
Address: Tel No.:	Name:	Kedar	Vasani
	Phone No.:	Keclar 079-29707.	526
Description of Duties: RF9T Engineer	E-mail id: (Preferably official)	Kecley. V	GSan; @deleys
Current Employment Authority Provided If No When	Yes/No	4-29	

All details are compulsory

Strictly Private & Confidential

DECLAS	TION
DECLARATION & I	ETTER OF AUTHORIZATION
TO THE RESERVE OF THE PARTY OF	

- I certify that the statements made in this application are valid and complete to the best of my knowledge. I
 understand that false or misleading information may result in termination of employment.
- If upon investigations, any of this information is found to be incomplete or inaccurate, I understand that I will be subject to dismissal at any time during my employment.
- I hereby authorize the Company and/or any of its subsidiaries or affiliates and any persons or organizations acting
 on its behalf (TP), to verify the information presented on this application form and to procure an
 investigative report or consumer report for that purpose.
- I hereby grant authority for the bearer of this letter to access or be provided with full details of my previous records. In addition, please provide any other pertinent information requested by the individual presenting this authority.
- I hereby release from liability all persons or entities requesting or supplying such information.

I have read, understand, and by my signature consent to these statements.

SIGNATURE: Amit RANJAN

DATE: 25/03/2022

NAME (IN BLOCK LETTERS): AMIT RANJAN

DOCUMENTS REQUIRED (COMPULSORY)	ATTACHED YES / NO
Copy of all past Employment Appointment & Relieving Letters / Salary Slips with employee	yes
code	

All details are compulsory

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