

Candidate Information Form

PERSONAL DETAILS		
Name of Applicant: Surname L.A	Middle	First Jayendrakumar
Date of Birth (dd/mm/yy): 23/11/1990		
Sex: Male		
Father's Name: Arul.L		
Home Phone:	Office Phone:	Mobile: 7708861424

EMPLOYMENT RECORD: Starting with your present or most recent employer, please list last 2 employments. When listing consulting or temporary assignments, under "Employer", state the name of the consulting or temporary agency that placed you at the client site. Complete and accurate dates (month/year) must be provided.

EMPLOYER 1 (Current): Integrated Wireless Solutions	Employee Id: INS10038 INS6984	From (mm/yy): 2017 may	To (mm/yy): June 2022
Street Address: 5th Cross Road Koramangala 4th block Koramangala, Bangalore, Karnataka 560095		Employer's Phone No.: 95380 33316	Remuneration/Salary: 21,000/-
City: Chennai	State: Tamil Nadu	Country: India	Postal Code:
Job Title: RF- Engineer	Reason for leaving: For Better career /package		
Employment Status: (Please check the relevant box) <input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Contract /Through Outsourcing Agency	Supervisor's Details:		
	Name:	Dinesh	
Outsourcing Agency Details: Name: INS Address: Bangalore Tel No.:	Title:	Project Manager	
	Phone No.:	9538033316	
	E-mail id: (Preferably official)	dinesh.p@iwsindia.com	
	HR Manager's Details:		
Description of Duties: RF optimization drive test, & port processing.	Name:	M/S. Vrushali Torane	
	Phone No.:	7021838113	
	E-mail id: (Preferably official)	Vrushali.torane@iwsindia.com	
Current Employment Authority Provided If No When	Yes/No		

All details are compulsory

Strictly Private & Confidential

EMPLOYER 2: MOVATE Technologies (CSS Corp) - (Formerly)	Employee Id: CSS144957	From (mm/yy): 06/2022	To (mm/yy): 06/2023
Street Address: AMBIT IT Park	Employer's Phone No.:	Remuneration/Salary:	
City: Chennai	State: Tamilnadu	Country: India	Postal Code: 600058
Job Title: Senior Engineer	Reason for leaving: For better career/ Package		
Employment Status: (Please check the relevant box) <input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Contract /Through Outsourcing Agency Outsourcing Agency Details: Name: NOKIA Address: Pacific Tech park, Navalur Tel No.:	Supervisor's Details: Name: Mr. Sivakumar Chandran Title: Manager (Spoc) Phone No.: 9944338768 E-mail id: (Preferably official) Sivakumar.Chandran@ ES MOVATE.COM		
Description of Duties:	HR Manager's Details:		
	Phone No.:	Name: MIS. Rama Devi	
	E-mail id: (Preferably official)		

All details are compulsory

Strictly Private & Confidential

EMPLOYER 3: Nil	Employee Id:	From (mm/yy):	To (mm/yy):
Street Address:		Employer's Phone No.:	Remuneration/Salary:
City:	State:	Country:	Postal Code:
Job Title:		Reason for leaving:	
Employment Status: (Please check the relevant box)		Supervisor's Details:	
<input type="checkbox"/> Full Time <input type="checkbox"/> Contract /Through Outsourcing Agency		Name:	
Outsourcing Agency Details:		Title:	
Name:		Phone No.:	
Address:		E-mail id:	
Tel No.:		<i>(Preferably official)</i>	
Description of Duties:		HR Manager's Details:	
		Name:	
		Phone No.:	
		E-mail id:	
		<i>(Preferably official)</i>	

All details are compulsory

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EMPLOYER 4: <i>Nil</i>	Employee Id:	From (mm/yy):	To (mm/yy):
Street Address:		Employer's Phone No.:	Remuneration/Salary:
City:	State:	Country:	Postal Code:
Job Title:		Reason for leaving:	
Employment Status: <i>(Please check the relevant box)</i> <input type="checkbox"/> Full Time <input type="checkbox"/> Contract /Through Outsourcing Agency Outsourcing Agency Details: Name: Address: Tel No.:		Supervisor's Details: Name: Title: Phone No.: E-mail id: <i>(Preferably official)</i>	
Description of Duties:		HR Manager's Details:	
		Name:	
		Phone No.:	
		E-mail id: <i>(Preferably official)</i>	

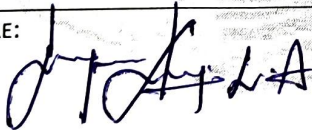
All details are compulsory

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DECLARATION & LETTER OF AUTHORIZATION

- 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 authorize *the Company* to contact my present employer. Yes No
- I have read, understand, and by my signature consent to these statements.

SIGNATURE:



DATE: 29.04.2023.

NAME (IN BLOCK LETTERS): JAYENDRAKUMAR

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

All details are compulsory

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