Candidate Information Form

PERSONAL DETAILS		
Name of Applicant: Surname	Middle MUNIYANDI	First R
Date of Birth (dd/mm/yy): 08-11-1994		
Sex: MALE		
Father's Name: M.RAVI		
Home Phone:	Office Phone:	Mobile: 9786031919

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): R.MUNIYANDI	Employee Id: ERXXMUN	From (mm/yy): 01/2023	To (mm/yy): 01/2025
Street Address: GLOBAL INFOCITY PARK, KODANDARAMA NAGAR, PERUNGUDI		Employer's Phone No.:	Remuneration/Salary:
City: CHENNAI / State: TAMIL NADU	Country: INDIA		Postal Code: 600096
Job Title: NETWORK ENGINEER	Reason for leaving: CAREER DEVELOPMENT AND NEW EXPERIENCE		

Employment Status: *(Please check the relevant box)*

- ☐ Full Time
- ☑ Contract /Through Outsourcing Agency

Outsourcing Agency Details:
Name: ORCAPAD CONSULTING SER PVT LTD
Address: 453-454, 4th FLOOR, JMD MEGAPOLIS
Tel No.: SECTOR 48, SOHNA ROAD GURGAON HARYANA-122018

Description of Duties:

Supervisor's Details:	
Name:	BIJU.CA
Title:	LINE MANAGER
Phone No.:	9387099935
E-mail id: *(Preferably official)*	biju.ca@ericsson.com
HR Manager's Details:	
Name:	CHARU TYAGI
Phone No.:	
E-mail id: *(Preferably official)*	charu.tyagi@orcapad.

Current Employment Authority Provided If No When	Yes/No	YES

All details are compulsory

Strictly Private & Confidential

EMPLOYER 2:	Employee Id:	From (mm/yy):	To (mm/yy):
R. MUNIYANDI	TNPL126010	08/2020	12/2022
Street Address: TELEYSIA NETWORK PVT Ltd. 603-606, FIRST AVENUE ROAD, OFF 132 Ft. VASTRAPUR,		Employer's Phone No.:	Remuneration/Salary:
City: AHMEDABAD	State: GUJARAT	Country: INDIA	Postal Code: 380015
Job Title: RF. ENGINEER		Reason for leaving:	

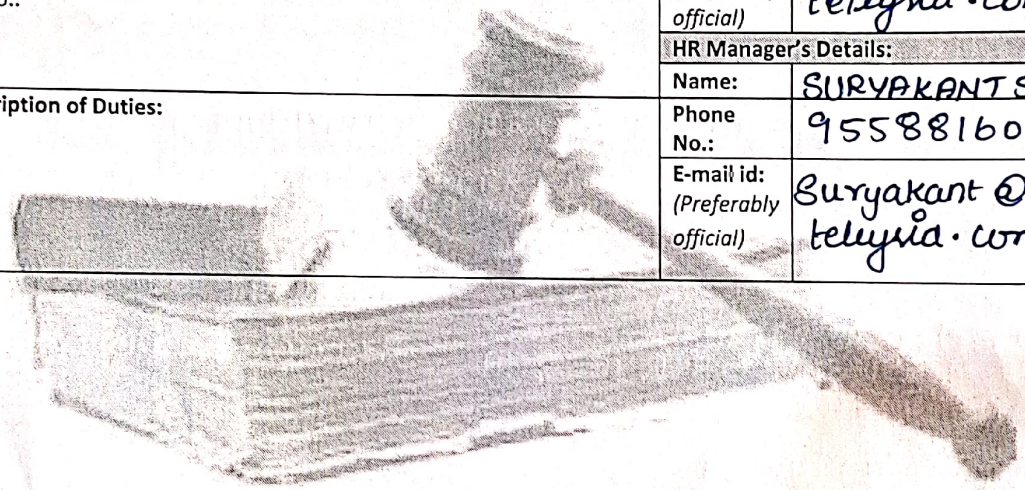
Employment Status: *(Please check the relevant box)*

- [x] Full Time
- [ ] Contract /Through Outsourcing Agency

Outsourcing Agency Details:
Name:
Address:
Tel No.:

Description of Duties:

Supervisor's Details:	
Name:	RAMAR MAHARAJAN
Title:	PROJECT MANAGER
Phone No.:	7904027703
E-mail id: *(Preferably official)*	ramar.maharajan@teleysia.com
HR Manager's Details:	
Name:	SURYAKANT SALUNKHE
Phone No.:	9558816026
E-mail id: *(Preferably official)*	suryakant@teleysia.com



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: 03.01.2025
NAME (IN BLOCK LETTERS): R.MUNIYANDI	

DOCUMENTS REQUIRED (COMPULSORY)	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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