## Candidate Information Form

PERSONAL D	DETAILS
Name of Applicant: Surname Middle	First ANANDH
Date of Birth (dd/mm/yy): 21/06/91	
Sex: MALE	
Father's Name: M. MAYAJOTHI	
Home Phone: Office Phone:	Mobile: 9994420577

EMPLOYMENT RECORD: Starting with your present or most temporary assignments, under "Employer", state the na Complete and accurate dates (month/year) must be provided in the p	me of the consulting or te	A DESCRIPTION OF THE PROPERTY		
EMPLOYER 1 (Current): Teamlease	Employee Id:	From (mm/yy):	To (mm/yy):	
Digital Private Limited	3179115	11/23	3 05/24	
Street Address: 6th floor, BMTC Comme to feet Road, Koramangala, Bar	ercial Complex,	Employer's Phone No.: (91-80)674955	Remuneration/Salary: 5, 28,3 12	
City: State: Bangalore Karnataka	Country: India	Post	al Code: 560095	
Job Title: ARP Engineer	Reason for leaving:		wth X Family	
Employment Status: (Please check the relevant box)	Supervisor's Details:			
Full Time	Name:	Anubhav Gautan		
Contract /Through Outsourcing Agency	Title:	Line manages		
	Phone No.:	9560299821		
Outsourcing Agency Details: Name: Teamlease digital Prt 1td Address: 6th froom, Brote Commercial Tel No.: Complex, 80 feet road, Koraman	E-mail id: (Preferably official)	anubhav.gautam@		
Address: 6th floor, Brute Commercial	HR Manager's Details:			
Complex, 80 feet road Koranar	Name:	Dundeg	owda	
Description of Duties: SA Report varidate	Phone No.:	916400	3275	
KPI Analytic, Drive Testing RNO Suggestions.	E-mail id: (Preferably official)	dundegowda. m@ teamlease.com		
Current Employment Authority Provided If No When	Yes/No			

EMPLOYER 2: TWS (Integrated	Employee Id:	From (m	ım/yy):	To (mm/yy):
Where less Solution)	IWS13277	09/23		11/23
Street Address: A-89, 1st floor, Se Noida, UP-20130	ctor-65.	Employer's P +91120 4		Remuneration/Salary:
city: Noida	State: Utbox Praded	Country:	1000	stal Code: 201301
Job Title: Sr Telecom Engine		Reason for	leaying:	uged by client.
Employment Status: (Please check the relevant bo	x) -	Supervisor's		
Full Time Contract /Through Outsourcing Agency		Name: Title:		Pracanth
Outsourcing Agency Details:		Phone No.:		544322
Name: IWS Address: A-89, 1st floor, Sector- Tel No.:	E-mail id: (Preferably official)	Surinf	rasanth@	
Noida, UP-201301		HR Manager's Details:		
B. B.		Name:	Vrus	hali Torane
Description of Duties: SA Report V		Phone No.:	702	1838113
KPI Analysis, Drive Tear RNO Suggestions.	ting,	E-mail id: (Preferably official)	vrush	nali, torane Sindia, Com

EMPLOYER 3:	Employee Id:	From (m	m/yy):	To (mm/γy):
HCL Technologies Ltd	52111471	08/	22	09/23
Street Address: SAL (602), 6th floor, CEZ, 1991 Igani Industrial Area	Tower 4, El Cot-	Employer's Pl		Remuneration/Salary: 4.50,006
	State:	Country:	Po	ostal Code:
Bangalore	karnataka	India		562106
Job Title: Lead Engineer		Reason for Care		work K Less Prejec
Employment Status: (Please check the relevant bo	). (xo	Supervisor's	Details:	
₩ Full Time		Name:	Sen	guttuvan
Contract /Through Outsourcing Agency		Title:	Line manageg	
Outsourcing Agency Details:		Phone No.:		61866998
Name:		E-mail id:	Sengi	uttuvan dura
Address: Tel No.:		(Preferably official)	1	+cr.com
i i		HR Manager's Details:		
		Name:	Raj	agopal
Description of Duties: SSV Paramet	es Audit.	Phone No.:	90	92123115
		E-mail id: (Preferably	Raja	gopal·k@
		official)	HCI	-· com

EMPLOYER 4:	Employee Id:	From (mm/yy):		To (mm/yy):	
Street Address:		Employer's Phone No.:		Remuneration/Salary:	
City:	State:	Country:	Po	stal Code:	
Job Title:	Job Title:		Reason for leaving:		
Employment Status: (Please check the re	elevant box)	Supervisor's Det	ails:		
Full Time	· ·	Name:		THE RESERVE TO THE RE	
Contract /Through Outsourcing Agency		Title:			
Outsourcing Agency Details:		Phone No.:	,		
Name:	e Par	E-mail id:			
Address:		(Preferably			
Tel No.:		official)			
		HR Manager's Details:			
		Name:			
Description of Duties:		Phone			
		No.: E-mail id:	<del>constan</del>		
		(Preferably			
To the second second second		official)			
		Official)			

DECLA	ARATIO	N & LETTE	R OF AUTH	IORIZATION

- 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: M. A

M. Drandh

DATE: 01-06-2024

NAME (IN BLOCK LETTERS): M. ANANDH

DOCUMENTS REQUIRED (COMPULSORY)	ATTACHED YES / NO
Copy of all past Employment & Relieving Letters / Salary Slips with employee	ATTACHED- YES.
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All details are compulsory

Strictly Private & Confidential