Candidate Information Form

PERSONAL DETAILS					
Name of Applicant: Surname	Hore M	Middle		First	Tinku
Date of Birth (dd/mm/yy): 18/11/1994					
Sex: Male					
Father's Name: Rabindranath Hore					
Home Phone:	Office Phone:		Mobile:	9614929765	

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): Employee Id:** From (mm/yy): To (mm/yy): 07/2023 Marquis Technologies Private Limited 12283 Now Street Address: Unit 804/805, Rupa Solitaire Park, Sector 1, Plot 2, 8th Floor, Millennium Business Park, Mahape, Navi Mumbai - 400710. INDIA Employer's Remuneration/Salary: Phone No.: 5.2 LPA 022-41554512/14 Postal Code: 400710 State: Maharashtra City: Navi Mumbai Country: India NA Test Engineer Job Title: Reason for leaving: **Employment Status:** (Please check the relevant box) Supervisor's Details: **Rohit Sawant** Name: Contract /Through Outsourcing Agency Project manager Title: +91 8879088953 Phone No.: **Outsourcing Agency Details:** E-mail id: rsawant@marquistech.com Name: (Preferably official) Address: HR Manager's Details: Tel No.: Nisha Pol Name: 7692963049 **Description of Duties:** Phone No.: npol@marquistech.com E-mail id: (Preferably official) **Current Employment Authority Provided** Yes If No When Yes/No

All details are compulsory

Strictly Private & Confidential

EMPLOYER 2:	Employee Id:	From (mm/yy):	To (mm/yy):
Street Address:		Employer's Phone	No.:	Remuneration/Salary:
City:	State:	Country:	Po	stal Code:
Job Title:	1	Reason for leaving	g:	
Employment Status: (Please check the relevant box)	Supervisor's Deta	ils:	
Full Time		Name:		
Contract /Through Outsourcing Agency		Title:		
Outsourcing Agency Details:		Phone No.:		
Name: Address:		E-mail id:		
Tel No.:		(Preferably		
		official) HR Manager's Details:		
		Name:		
Description of Duties:	1000	Phone		
		No.:		
		E-mail id:		
		(Preferably		
		official)		

Previouly I have worked as a Freelance Python Developer. So above mentioned details are not applicable.

EMPLOYER 3:	Employee Id:	From (mm/y	y):	To (mm/yy):
Street Address:		Employer's Phone	No.:	Remuneration/Salary:
City:	State:	Country:	Ро	stal Code:
Job Title:		Reason for leaving:		
Employment Status: (Please check the relevant b	pox)	Supervisor's Det	ails:	
☐ Full Time		Name:		
Contract /Through Outsourcing Agency		Title:		
Outsourcing Agency Details:		Phone No.:		
Name: Address:		E-mail id:		
Tel No.:		(Preferably official)		
		HR Manager's Details:		
		Name:		
Description of Duties:	V 30 1974	Phone		
		No.:		
		E-mail id:		
V	-	(Preferably		
		official)		

Previouly I have worked as a Freelance Python Developer. So above mentioned details are not applicable.

EMPLOYER 4:	Employee Id:	From (mm/y	/):	To (mm/yy):	
Street Address:		Employer's Phone	No.:	Remuneration/Salary:	
City:	State:	Country:	Ро	stal Code:	
Job Title:		Reason for leaving:			
Employment Status: (Please check the relevant	box)	Supervisor's Det	ails:		
☐ Full Time		Name:			
Contract /Through Outsourcing Agency		Title:			
Outsourcing Agency Details:		Phone No.:			
Name: Address:		E-mail id:			
Tel No.:		(Preferably official)			
		HR Manager's Details:			
		Name:			
Description of Duties:		Phone			
		No.:			
		E-mail id:			
	- 10	(Preferably			
		official)			

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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.		
(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.		
r	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.		
• 1	hereby release from liability all persons or entities requesting or supplying such information.		
• (authorize <i>the Company</i> to contact my present employer. Yes No		
• 1	have read, understand, and by my signature consent to these statements.		
SIGNATUR	DATE: 24/05/2025		

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

All details are compulsory

NAME (IN BLOCK LETTERS): TINKU HORE

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