

## Candidate Information Form

PERSONAL DETAILS			
Name of Applicant:	Surname <b>Patil</b>	Middle <b>Shrirang</b>	First <b>Sushant</b>
Date of Birth (dd/mm/yy):	<b>09/12/1990</b>		
Sex:	<b>M</b>		
Father's Name:	<b>Shrirang Bapu Patil</b>		
Home Phone:	Office Phone:	Mobile: <b>9221581098</b>	

**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):
<b>MARQUIS TECHNOLOGIES PVT LTD</b>		<b>11796</b>	<b>SEP-2021</b>	
Street Address: <b>Unit 804/805, Rupa Solitaire Park, Sector 1, Plot 2, 8th Floor, Millennium Business Park</b>			Employer's Phone No.:	Remuneration/Salary:
			<b>022-41554514</b>	
City:	State:	Country:	Postal Code:	
<b>Navi Mumbai</b>	<b>Maharashtra</b>	<b>India</b>	<b>400710</b>	
Job Title:		Reason for leaving:		
<b>Test Engineer</b>				
Employment Status: (Please check the relevant box)		Supervisor's Details:		
<input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Contract /Through Outsourcing Agency				
<b>Outsourcing Agency Details:</b> Name: Address: Tel No.:		Name:		
		Title:		
		Phone No.:		
		E-mail id: (Preferably official)		
		<b>hsaini@marquis-tech.com</b>		
		HR Manager's Details:		
		Name:		
		Phone No.:		
		E-mail id: (Preferably official)		
		<b>npol@marquistech.com</b>		
Description of Duties:				
Current Employment Authority Provided If No When		Yes/No		

All details are compulsory

Strictly Private & Confidential



EMPLOYER 2:	Employee Id:	From (mm/yy):	To (mm/yy):
Tikona Internet Pvt LTD.			
Street Address: 3 <sup>rd</sup> floor, Corporate, LBS Marg Bhandup (West)	Employer's Phone No.: 022-41830111	Remuneration/Salary:	
City: Mumbai	State: Maharashtra	Country: India	Postal Code: 400078.
Job Title: RFNOC Engineer	Reason for leaving: New opportunity.		
Employment Status: (Please check the relevant box)	Supervisor's Details:		
<input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Contract /Through Outsourcing Agency	Name: Chandan Sir		
	Title: Manager.		
	Phone No.: 9930974720.		
	E-mail id: (Preferably official)		
Outsourcing Agency Details: Name: Address: Tel No.:	HR Manager's Details:		
	Name: Varsha prabhakaran		
	Phone No.: 9664379766.		
	E-mail id: (Preferably official) Varsha.prabhakaran@tikona.co.in.		
Description of Duties:			

All details are compulsory

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EMPLOYER 3:		Employee Id:	From (mm/yy):	To (mm/yy):
Vishay Semiconductor India Pvt Ltd			1-1-2017	15-02-2018.
Street Address: SDF#123 unit, SEE p2, Andheri-(E)		Employer's Phone No.:	Remuneration/Salary:	
		022-30880505.		
City:	State:	Country:	Postal Code:	
Mumbai	Maharashtra	India	400096.	
Job Title:		Reason for leaving:		
Apprentice		Mom medical Reason		
Employment Status: (Please check the relevant box)		Supervisor's Details:		
<input checked="" type="checkbox"/> Full Time <input type="checkbox"/> Contract /Through Outsourcing Agency				
Outsourcing Agency Details:				
Name:		Name:		
Address:		Title:		
Tel No.:		Phone No.:		
		E-mail id: (Preferably official)		
		HR Manager's Details:		
		Name:		
		Phone No.:		
		E-mail id: (Preferably official)		
Description of Duties:				

All details are compulsory

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

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:

*Sushant Patil*

DATE: 29/05/2025.

NAME (IN BLOCK LETTERS): SUSHANT SHRIRANG PATIL

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

All details are compulsory

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