

Candidate Information Form

PERSONAL DETAILS		
Name of Applicant: Surname YADAV	Middle BHIMRAO	First PRANALI
Date of Birth (dd/mm/yy): 04/10/2000		
Sex: FEMALE		
Father's Name: BHIMRAO		
Home Phone: 9594817718	Office Phone:	Mobile: 8652080693

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): HMT & HOLIDAYS PVT LTD		Employee Id:	From (mm/yy): 05/2023	To (mm/yy): 07/2024														
Street Address: KAMOTHE		Employer's Phone No.: 623964876 0		Remuneration/Salary: 16000														
City: NAVI MUMBAI	State: MAHARASHTRA	Country: INDIA		Postal Code: 401206														
Job Title: HR EXECUTIVE		Reason for leaving: COMPANY CLOSED																
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: <table><tbody><tr><td>Name:</td><td>RUPAL SINGH</td></tr><tr><td>Title:</td><td>PA</td></tr><tr><td>Phone No.:</td><td>7977665996</td></tr><tr><td>E-mail id: <i>(Preferably official)</i></td><td>- COMPANY CLOSED</td></tr></tbody></table> HR Manager's Details: <table><tbody><tr><td>Name:</td><td>DIPALI KALE</td></tr><tr><td>Phone No.:</td><td>88779172736</td></tr><tr><td>E-mail id: <i>(Preferably official)</i></td><td>COMPANY CLOSED</td></tr></tbody></table>			Name:	RUPAL SINGH	Title:	PA	Phone No.:	7977665996	E-mail id: <i>(Preferably official)</i>	- COMPANY CLOSED	Name:	DIPALI KALE	Phone No.:	88779172736	E-mail id: <i>(Preferably official)</i>	COMPANY CLOSED
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Phone No.:	88779172736																	
E-mail id: <i>(Preferably official)</i>	COMPANY CLOSED																	
Description of Duties: RECRUITMENT & OPERATIONS																		
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):														
Street Address:		Employer's Phone No.:	Remuneration/Salary:														
City:	State:	Country:	Postal Code:														
Job Title:		Reason for leaving:															
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Description of Duties:																	

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EMPLOYER 3:	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:									
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		Name:									
		Phone No.:									
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All details are compulsory

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EMPLOYER 4:	Employee Id:	From (mm/yy):	To (mm/yy):								
Street Address:		Employer's Phone No.:	Remuneration/Salary:								
City:	State:	Country:	Postal Code:								
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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: 03-02-2025

NAME (IN BLOCK LETTERS): PRANALI BHIMRAO YADAV

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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