EMPLOYEE MEDICAL SELF DECLARATION FORM

Please specify if you're having health issue: YES/ If yes, please specify in detail:	NO_NO
Suffering from any chronic diseases: YES/NO NO NO If yes, please specify in detail:	<u>) </u>
Undergoing any Medical Treatment: YES/NO No No If yes, please specify in detail:	2
I, Umesh Champroon	of B/28 (carpana Nicoas, Salcinaka
(Applicant's Name)	(Applicant's Address)
Agree as an applicant being a fit and proper person and	dable to perform the inherent requirements of the position.
and no information concerning my past or present sta	re true and correct and complete to the best of my knowledge ate of health has been withheld. I understand that any wilfully
	which relates to any of the questions before mentioned may liable to disciplinary action which may include dismissal. I ion may form part of my file.
I also voluntarily and freely consent to sharing of the a Marquis Technologies Pvt. Ltd	above personal information in relation job employment to
Applicant's signature	Date 05 03 2023