

PERSONAL INFORMATION FORM



Title:

Full Name (As per Aadhaar/Passport):

Date of Birth:

Gender:

Nationality:

Religion:

Current Address:

Email ID:

Passport No:

Contact Numbers (with country code):

Skype ID:

Marital Status:

Number of Kids:

PAN Card:

Ages of Kids:

Aadhaar Card No:

Academic Degree:

Is your Degree attested?(Yes/No):

Professional Certifications:

Relevant years of experience in position applied:

Total years of work experience:

Current Salary in (your currency) (Per Month) (including all benefits):



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Expected Salary in (Per Month with Currency details) (including all benefits):

Driving License (Yes/No):

Notice Period:

Latest Availability to Join:

Reason for leaving the company:

Other Informations:

I, the undersigned certify that all the above statements are correct and complete

Name:

Date:

Signature:

(Please sign with your complete Name)

