

Curriculum Vitae



Job Profile	Driver/House Driver
Contact Details	-----
Expected Salary	90-100 KD Knows Hindi, English, Telugu, Arabic

Personal Details

Full Name	Naveen Kothapelly
Father's Name	Gangadhar Kothapelly
Mother's Name	Thulasi Kothapelly
Marital Status	Unmarried
Nationality/Religion	Indian/Hindu
Date of Birth	11/06/1996
Age/Sex	26/Male
Place of Birth	Bhushanraopeta, Telangana

Languages known

Language	Hindi	English(basic)	Arabic	Any other
Read/Understand	Yes	Yes	Yes	Telugu
Write	Yes	Yes	No	
Speak	Yes	Yes	Yes	

Passport and Driving License details

	No.	Place of issue	Date of issue	Date of expiry	ECR/ECNR	Class of Vehicle
Passport details	P3418084	Hyderabad	04/07/2016	03/07/2026		
Driving license details	TS12120160000206	Telangana State	01/11/2016	31/10/2026		MCWG, LMV

Academic Records

Year	Qualification	Board	Class
	SSC		

Work Experience

Year	Place	Job
<ul style="list-style-type: none"> 4 years experience in Areej company As Assistant in HDPE Department 4 years as extrusion blow molding, machine 		Driver

<p>operating & I known about Techne, Automa , Automa +5D, KEB 5, Changeover & production also</p> <ul style="list-style-type: none">• 2 years in India as Driver		
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Signature
Naveen Kothapelly



विविध सेवा / MISCELLANEOUS SERVICE

टिप्पणी / OBSERVATION

पिता / स्वामी अधिकारी का नाम / Name of Father / Legal Guardian

GANGADHAR KOTHAPELLY

माता का नाम / Name of Mother

THULASI KOTHAPELLY

पति का नाम / Name of Spouse

पता / Address

8-76 MAIN ROAD

BHUSHANRAOPETA KATHALAPUR, KARIMNAGAR

PIN: 505462, TELANGANA, INDIA

पत्रिका सं. / File No.

HY4069459924916



P3418084

INDIAN UNION DRIVING LICENCE
 TELANGANA STATE





TS12120160000206

**KOTHAPELLY NAVEEN
GANGADHAR**
8-76
**BHUSHANRAOPET
KATHALAPUR
KATHLAPUR
KARIMNAGAR - 505462**






Licencing Authority

Signature

Licencing Authority

Issued On: 01/11/2016

UNIT OFFICE KORUTLA

Non Transport	Light Motor Vehicle Non Transport, Motor Cycle With Gear
Date of Validity Transport	31/10/2036
Date of Validity Badge No.	
Reference No.	TS12120160000206
Original LA.	UNIT OFFICE KORUTLA
Date of First Issue	01/11/2016
Date of Birth	11/06/1996
Blood Group	

DL0778728/15





Ministry of Health & Family Welfare
Government of India

Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID **94581577963**


Beneficiary Details

Beneficiary Name / లభదారుని పేరు	Kothapelly Naveen
Age / వయస్సు	25
Gender / లింగం	Male
ID Verified / ఐడి ధృవీకరించబడింది	Passport # P3418084
Unique Health ID (UHID)	
Beneficiary Reference ID	32584977185718
Vaccination Status / టీకా స్థితుస్	Fully Vaccinated (2 Doses)

Vaccination Details

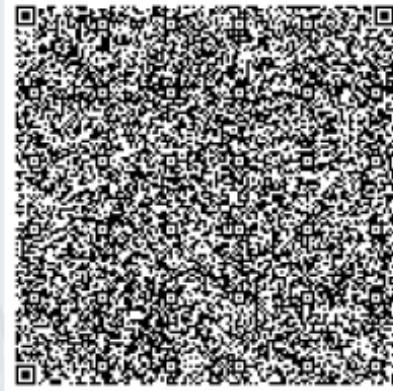
Vaccinated By / టీకాలు వేయించినవారు	B Kavitha
Vaccination At / టీకాలు వేసిన టోటు	KTLP Kathalapur I, Jagtial, Telangana

Dose Number మోతాదు సంఖ్య	Date of Dose మోతాదు తేదీ	Vaccine Name టీకా పేరు	Batch Number బ్యాచ్ నంబరు	Vaccine Type టీకా రకం	Manufacturer తయారీదారు
1/2	14 Aug 2021	COVISHIELD	41212147	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India
2/2	30 Nov 2021	COVISHIELD	4121MF019	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.



**“టీకాతో పాటు పత్యం కూడా చెయ్యాలి
Together, India will defeat COVID-19”
- ప్రధానమంత్రి నరేంద్ర మోదీ**

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075
ఏదైనా ప్రతికూల సంఘటనలు జరిగితే, దయచేసి సమీప ప్రజారోగ్య కేంద్రం / హెల్ప్లైన్ నెం. 1075 / జిల్లా ఇమ్మునైజేషన్ ఆఫీసర్కు సంప్రదించండి / రాష్ట్ర హెల్ప్లైన్ నెం. 1075



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