

Curriculum Vitae



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|-------------------------|---|
| Job Profile | House Driver |
| Contact Details | ----- |
| Expected Salary | 100 KD(fully vaccinated), he can speak Hindi, English, Bengali |
| Personal Details | |

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|-----------------------------|-------------------------|
| Full Name | Animesh Baskey |
| Father's Name | Kamal baskey |
| Mother's Name | Agnesh Baskey |
| Marital Status | Married |
| Nationality/Religion | Indian/Christian |
| Date of Birth | 16/02/1992 |
| Age/Sex | 31/Male |
| Place of Birth | Roushanbag, West Bengal |

Languages known

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

Passport and Driving License details

| | No. | Place of issue | Date of issue | Date of expiry | ECR/ECNR | Class of Vehicle |
|-------------------------|-----------------|----------------|---------------|----------------|----------|------------------|
| Passport details | V2170903 | Kolkata | 09/09/2021 | 08/09/2031 | | |
| Driving license details | WB5720130028768 | West Bengal | 02/07/2013 | 27/12/2027 | | LMV LMV-TR |

Academic Records

| Year | Qualification | Board | Class |
|------|---------------|-------|-------|
| | | | |

Work Experience

| Year | Place | Job |
|--------------------------------------|-------|--------|
| 10 years driving experience in India | | Driver |

Signature
Animesh Baskey



GOVERNMENT OF WEST BENGAL
INDIAN UNION DRIVING LICENCE

Driving Licence No : WB57 20130028768

Name : ANIMESH BASKEY

Address :
VILL. RIUSHANBAG,
P.O. HATINAGAR, P.S. BERHAMPORE,
DT. MURSHIDABAD, 742102

S/D/W Of : KAMAL BASKEY

| | | |
|-----------------|------------|------------------|
| Date of Issue | 02-07-2013 | Blood Group : B+ |
| Valid Till (NT) | 01-07-2033 | Date of Birth : |
| Valid Till (TR) | 27-12-2027 | 16-03-1992 |

Licence holder sign

Licensing Authority : L.A. MURSHIDABAD Licensing Authority Sign

Authorisation to drive the following vehicle class throughout India

| Vehicle Class | Date Of Issue |
|---------------|---------------|
| LMV | 02-07-2013 |
| LMV-TR | 28-12-2022 |
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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 14498361231

Beneficiary Details

Beneficiary Name / সুবিধাজোগীৰ নাম Animesh Baskey
Age / বয়স 30
Gender / লিঙ্গ Male
ID Verified / আই ডি এর প্রকার Aadhaar # XXXXXXXX4513
Unique Health ID (UHID)
Beneficiary Reference ID 36727888858978
Vaccination Status / টিকাকরণের স্থিতি Fully Vaccinated (2 Doses) and a Precaution Dose

Vaccination Details

Vaccinated By / টিকাকর্মী HAIMANTI TEWARY
Vaccination At / টিকাকরণের স্থান MARY IMMACULATE SCHOOL, Murshidabad, West Bengal

| Dose Number ডোজ নম্বর | Date of Dose ডোজের তারিখ | Vaccine Name ভ্যাকসিনের নাম | Batch Number ব্যাচ নম্বর | Vaccine Type ভ্যাকসিনের ধরন | Manufacturer প্রস্তুতকারক |
|--------------------------|-----------------------------|--------------------------------|-----------------------------|---|---------------------------------------|
| 1/2 | 14 Aug 2021 | COVISHIELD | 4121MC050 | COVID-19 vaccine, non-replicating viral vector | Serum Institute of India |
| 2/2 | 12 Nov 2021 | COVISHIELD | 4121Z236 | COVID-19 vaccine, non-replicating viral vector | Serum Institute of India Pvt. Ltd. |
| Precaution dose | 23 Jul 2022 | COVISHIELD | 4121O23M | COVID-19 vaccine, non-replicating viral vector | Serum Institute of India Pvt. Ltd. |



“দাবাই ভী অর কড়াই ভী।

Together, India will defeat
COVID-19”

- প্রধানমন্ত্রী নরেন্দ্র মোদী

In case of any adverse events, kindly contact the nearest Public Health Center/
Healthcare Worker/District Immunization Officer/State Helpline No. 1075

কোনও প্রতিফল ঘটনা ঘটলে, দয়া করে নিকটবর্তী জনস্বাস্থ্য কেন্দ্র / স্বাস্থ্যসেবা কর্মী / জেলা টিকাকরণ
অফিসার/রাজ্য হেল্পলাইন নং ১০৭৫ এ যোগাযোগ করুন

COWIN
Winning Over COVID

