

مكتب جميل احمد الهند

APPLYING FOR

RETURN
HOUSE
DRIVERسائق منزل
العودة

وظيفة

SALARY

1700 SR

الراتب

WORK EXPERIENCE

خبرة في العمل

04. YEARS EXPERIENCE IN- (QATAR)

05. YEARS EXPERIENCE IN-(INDIA)

04. سنوات من الخبرة في (دولة قطر)

05. سنوات من الخبرة في (الهند)



السيرة الذاتية CV

MUSANED IN IDEAL

SAUDI ARAB- SECTOR(RIYADH)

FULL NAME	KHANSHAHIB RAHMATHULLA	بالكامل الاسم
AGE	21. YEARS	العمر
RELIGION	MUSLIM	دين مسلم
MARRITAL STATUS	MARRIED	الحالة الاجتماعية
PASSPORT NO.	U8774814	السفر جواز رقم
PASSPORT TYPE	ECNR	السفر جواز نوع
NATIONALITY	INDIAN	جنسية
DATE OF BIRTH	09/05/2002	الولادة تاريخ
PLACE OF BIRTH	POLLACHI, TAMIL NADU	الولادة مكان
PLACE OF ISSUE	COIMBATORE	صدوره مكان
DATE OF ISSUE	02/12/2020	المسألة تاريخ
DATE OF EXPIRY	01/12/2030	الانتهاء تاريخ
ADDRESS	ANNAPOORANIAMMAL LAYOUT POLLACHI	عنوان
LANGUAGES	HINDI.ARBIC.	اللغات
MEDICAL STATUS	FIT- 11/02/2024	الطبية الحالة
DRIVING LICENSE	HOLDING -QATAR LICENCE	قيادة رخصة
MOFA FOR		الخارجية وزارة

OFFICE USE استخدام مكتبي



State of Qatar
Ministry of Interior
Traffic Department

دولة قطر
وزارة الداخلية
إدارة المرور



DRIVING LICENSE

رخصة قيادة

30235604789

الرقم الشخصي

الإسم: كانشاهيب رحمة الله

NAME KHANSHAHIB RAHMATHULLA

NAT. INDIA

الجنسية الهند

DATE OF BIRTH 2002-05-09

تاريخ الميلاد

BLOOD GR.

نوعية الدم

FIRST ISSUE 2022-09-14

تاريخ الصادرة

VALIDITY 2027-09-13

تاريخ الانتهاء





Indian Union Driving Licence
Issued by Government Of Tamil Nadu

TN

TN41 20230005582



Date of first issue 30-10-2023



Issue Date

Validity (NT)

Validity (TR)

30-10-2023

08-05-2042

Holder's Signature

Name:

KHANSHAHIB R

Date of Birth : **09-05-2002**

Blood Group: **O+**

Organ Donor: **N**

Son/Daughter/Wife of:

RAHMATHULLA

Address:

50/28 Annapooraniammal Layout Pollachi Coimbatore

Tamil Nadu 642001





PDL

DL No: TN41 20230005583


TN010.30507



Class of Vehicle	Code	Issued by	Date of Issue	Vehicle Category	Badge Number	Badge Issued Date	Badge Issued by
	MCWG	TN41	30-10-2023	NT			
	LMV	TN41	30-10-2023	NT			

Form 7 Rule 16(2)

Emergency Contact Number


Licensing Authority
TN41 POLLACHI RTO



U8774814

पिता / कानूनी अभिभावक का नाम / Name of Father / Legal Guardian

RAHMATHULLA

माता का नाम / Name of Mother

AYSHA

पति या पत्नी का नाम / Name of Spouse

पता / Address

50/28, ANNAPOORANIAMMAL LAYOUT**POLLACHI, COIMBATORE RURAL****PIN: 642001, TAMIL NADU, INDIA**

पुराने पासपोर्ट का नं. और इसके जारी होने की तिथि एवं स्थान / Old Passport No. with Date and Place of Issue

फाईल नं. / File No.

CB1063115204920



G.H.C. Code No.
01/05/02

GCC Slip No.
10712202362711017

Medical center name
Gulshan Medicare - Cochin

Date examined
11/12/2023

Report expiry date
11/2/2024

CANDIDATE INFORMATION



Name	KHANSHAHIB RAHMATHULLA		Gender	Male	Nationality	Indian	Traveling to	Saudi Arabia	
Marital status	Unmarried	Passport No.	U8774814	Passport expiry date	1/12/2030	Phone	+919061361673	Profession	PERSONAL DRIVER
Height	165.0 cm	Weight	82.0 kg	BMI	30.12				

EXAMINATION: GENERAL

0/80 Pulse/min 73

INVESTIGATION

Chest X-Ray NAD Comment

VISUAL ACUITY AIDED AND UNAIDED

Colour vision Normal Comments

DISTANT/AIDED
Left eye 6/

DISTANT/UNAIDED
Left eye 6/ 9 Right eye 6/ 9

NEAR/AIDED
Left eye 20/ Right eye 20/

NEAR/UNAIDED
Left eye 20/ 20 Right eye 20/ 20

HEARING

Left ear Normal Right ear Normal

SYSTEM EXAMINATION

General appearance NAD Cardiovascular NAD
Respiratory NAD ENT NAD

GASTRO INTESTINAL

Abdomen (Mass, tenderness) NAD Hernia NAD

GENITOURINARY

Genitourinary NAD Hydrocele NAD

MUSCULOSKELETAL

Extremities NAD Back NAD
Skin NAD C.N.S. NAD
Deformities NAD

MENTAL STATUS EXAMINATION

APPEARANCE

Appearance NAD Speech NAD
Behaviour NAD

COGNITION

Cognition NAD Orientation NAD
Memory NAD Concentration NAD
Mood NAD Thoughts NAD
Others NAD Remarks

BLOOD

Blood group O+ Haemoglobin g/dL 15.2

THICK FILM FOR

Malaria Absent Micro filaria Absent

BIOCHEMISTRY

R.B.S 95.0 L.F.T Normal
Creatinine 0.5

SEROLOGY

HIV I&II Negative HBs Ag Negative
Anti HCV Negative VDRL Negative
TPHA (if VDRL positive) Negative

URINE

Sugar Negative Albumin Negative

STOOL

ROUTINE

Helminthes Absent OVA Absent
CYST Absent Others

VACCINATION STATUS

Polio	No	Date	
MMR 1	Yes	Date	
MMR 2	No	Date	
Meningococcal	Yes	Date	
COVID-19	Yes	Date	09/05/2021

Remarks

Mentioned above is the medical report for Mr./Ms. KHANSHAHIB RAHMATHULLA who is Fit for the above mentioned job according to the GCC criteria

Doctor's name

Signature



FIT

Dr. THASNEEN.A.M
REG.NO: 7890
GULSHAN MEDICARE
NO:41/3015,AMULYA STREET
BANERJEE ROAD, KOCHI - 18
PHONE NO: 0484-4051354,4051454