

مكتب جميل احمد الهند

APPLYING FOR

FRESH
HOUSE
DRIVERسائق منزل
جديد

وظيفة

SALARY-

1400 SR

الراتب

WORK EXPERIENCE

خبرة في العمل

06.YEARS EXPERIENCE IN-(INDIA)

06. سنوات من الخبرة في (الهند)



السيرة الذاتية CV

MUSANED IN IDEAL

SAUDI ARAB- SECTOR(RIYADH)

FULL NAME	SHAKIR ALI	بالكامل الاسم
AGE	42. YEARS	العمر
RELIGION	MUSLIM	دين مسلم
MARRITAL STATUS	MARRIED	الحالة الاجتماعية
PASSPORT NO.	Y8757551	السفر جواز رقم
PASSPORT TYPE	ECR	السفر جواز نوع
NATIONALITY	INDIAN	جنسية
DATE OF BIRTH	05/03/1981	الولادة تاريخ
PLACE OF BIRTH	BARABANKI ,UTTAR PRADESH	الولادة مكان
PLACE OF ISSUE	LUCKNOW	صدوره مكان
DATE OF ISSUE	14/11/2023	المسألة تاريخ
DATE OF EXPIRY	13/11/2033	الانتهاء تاريخ
ADDRESS	BHATWAMAU BELHARA TEHSIL FATEHPUR	عنوان
LANGUAGES	HINDI.	اللغات
MEDICAL STATUS	FIT- 02/03/2024	الطبية الحالة
DRIVING LICENSE	HOLDING - INDIAN LICENCE	قيادة رخصة
MOFA FOR		الخارجية وزارة

OFFICE USE استخدام مكتبي



Indian Union Driving Licence
Issued by Uttar Pradesh

UP

UP41 20200001294

Issue Date	Validity (NT)	Validity (TR)*
20-01-2020	19-01-2030	-----



Signature
Holder's Signature

Name: **SHAKIR ALI**

Date of Birth: **01-01-1981** Blood Group: **AB+ V** Organ Donor: **N**

Son/Daughter/Wife of: **MOHD MUBARAK**

Address:

**VILL BHATWAMAU POST BELHARA PS MOHD PUR
KHALA FATEHPUR, BARA BANKI, UP 225305**

Date of First Issue (20-01-2020)



Invalid Carriage (Regn Numbers)*

Hazardous Validity*

Hill Validity*

Class of Vehicle	Code	Issued By	Date of Issue	Vehicle Category	Badge Number*	Badge Issued Date*	Badge Issued By*
MCWG	UP41	20-01-2020	NT				
LMV	UP41	20-01-2020	NT				
MVSD							

Emergency Contact Number

Licensing Authority
UP41 BARABANKI



EMIGRATION CHECK REQUIRED

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

MO MUBARAK

माता का नाम / Name of Mother

NASIMUN

पति या पत्नी का नाम / Name of Spouse

GUDIYA

पता / Address

BHATWAMAU POST-BELHARA**TEHSIL-FATEHPUR, BARABANKI****PIN:225305,UTTAR PRADESH,INDIA**

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

फाइल नं. / File No.

LK3068768751423**Y8757551**



G.H.C. Code No.
01/07/13

GCC Slip No.
10101202463067478

Medical center name
Puraniya Diagnostic Centre

Date examined
2/1/2024

Report expiry date
2/3/2024

CANDIDATE INFORMATION



Name
SHAKIR ALI .
Marital status
Married
Height
169.0 cm

Passport No.
Y8757551
Weight
65.0 kg

Age
42
BMI
22.76

Gender
Male
Passport expiry date
13/11/2033

Nationality
Indian
Phone
+7489997992

Traveling to
Saudi Arabia
Profession
Driver

MEDICAL EXAMINATION: GENERAL

Blood pressure 124/80
RR/min 16
Pulse/min 74

VISUAL ACUITY AIDED AND UNAIDED

Colour vision Normal
Comments
DISTANT/AIDED
Left eye 6/ Right eye 6/
DISTANT/UNAIDED
Left eye 6/ 6/6 Right eye 6/ 6/6
NEAR/AIDED
Left eye 20/ Right eye 20/
NEAR/UNAIDED
Left eye 20/ 20/20 Right eye 20/ 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 Remarks

INVESTIGATION

Chest X-Ray NAD Comment

LABORATORY INVESTIGATION

BLOOD
Blood group AB+ Haemoglobin g/dL 15.0
THICK FILM FOR
Malaria Absent Micro filaria Absent
BIOCHEMISTRY
R.B.S 103.0 L.F.T Normal
Creatinine 0.83
SEROLOGY
HIVI&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 02/01/2024
MMR 2 No Date
Meningococcal Yes Date 02/01/2024
COVID-19 No Date

Remarks

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

Doctor's name

Signature



Dr. ASMA PARVEEN
M.B.B.S., M.D.
Reg. No.- 60510