APPLICATIONFOREMPLOYMENT

SYNTEL, INC.

Syntel, Inc., is an equal opportunity employer and does not discriminate against applicants on the basis of race, age, sex, religion, disability, national origin, marital status, weight, height, color, sexual orientation, or any other classification protected by Federal, State, or Local ordinance, regulation, or law.

Instructions: Complete all necessary information. You may be asked to provide additional information on another form. This application will be kept on file. It is to your advantage to periodically check to keep it current and active. Be sure to sign and date the application. Please print.

Name							
Phone	()						
Address							
City/State/Zip							
Position applied for							
Expected Pay							
_	ept full time work? ept part time work?	Yes Yes	No No				
Are there any days or hours of the week you cannot							
work? If yes, when?							
On what date w	ould you be available for	work?					
Have you ever been employed here before? No Yes Date							
Special training or skills (languages, computer skills, etc.) that would be of special benefit in this job for which you are applying:							
Are you legally (If yes, proof is	eligible for employment required)	in the United	States?	Yes	No		
Do you have reliable transportation to work? Yes No							

Are you willing to relocate for a job assignment?			
Yes No			
If you are only available for a specific employment location (s) please list.			
Have you previously been employed by Syntel, Inc. or any related company? Yes			
No			
If yes, under what name?			
Have you previously submitted an ap	oplication to one of	the aforementioned Cor	mpanies?
No			
If yes, under what name?			
Are you related by marriage or otherwise to any past or present employee of the aforementioned Companies: Yes No			
If yes, please identify:			
Are you of legal age to work in the U	United States? Yes	s No	
EDUCATIONAL BACKGROUND			
School Name/location of school	Course of study	Did you graduate	Degree/diploma
Grammar School			
High School			
College			
Graduate School			
Vocation Training - Other			
Membership in professional or civic organizations (Exclude those which may disclose your race, color, religion, national origin, age, or other protected classification.)			

EMPLOYMENT EXPERIENCE

Place an X by the employer(s) you do not want us to contact. List your most recent employer first.

1. Employer	Address
Employee ID:	
Phone ()	
Job Title	Supervisor
Dates Employed: From To _ (mm/dd/yr)	Wages : starting final
Work Performed	Reason for Leaving
2. EmployerEmployee ID:	Address
Phone ()	
Job Title	Supervisor
Dates Employed: From To _ (mm/dd/yr)	Wages : starting final
Work Performed	Reason for Leaving
3. Employer	Address
Employee ID:	
Phone ()	
Job Title	Supervisor
Dates Employed: From To _ (mm/dd/yr)	Wages : starting final
Work Performed	Reason for Leaving

4.	Employer	Address	
Emp	ployee ID:		
Pho	one ()		
Job	Title	Supervisor	
Date	es Employed: From To _ (mm/dd/yr)	Wages : starting	_ final
Wo	rk Performed	Reason for Leaving	
RE	CFERENCES her than family members or previo	ous employers)	
1.		Phone () -	
	Address		
2.	NameAddress	Phone () -	
3.	Name	Phone () -	
	Address		

	y restrictive covenant, non-compete, non-solicitation, intellectual ality agreement which would limit or restrict your ability to work in any
	No
If the answer is yes, pl	ease elaborate.
local law, regulation o	ted, pleaded guilty or nolo contendere, for violating any federal, state or rordinance?
fine of \$150 or less w pardoned, or statutori consideration for emp	details, and date of conviction (excluding traffic violations for which a as imposed, or any conviction that has been officially sealed, expunged, ly eradicated). A conviction will not automatically exclude you from loyment and you are invited to provide us with any relevant information ances of any conviction.
from consideration for	charges currently pending? A charge will not automatically exclude you employment and you are invited to provide us with any relevant e circumstances of any charge.
Yes N	0
ADITIONAL INFORM	IATION
Are you able to perform applying with or withou	each of the essential functions listed for the position for which you are accommodation? Yes No
•	job functions with an accommodation, please describe how you would d with what accommodations.

Are you a US Military veteran? Yes

No

Any offer of employment is contingent on your passing a Background Screening Test that may be required by Syntel or by our clients. The Background Screening Test may include screening of past employment, education verification, criminal checks, drug screening, compliance with governmental requirements and other background screening based on specific client requirements. If you do not pass a Background Screening Test, you understand and agree that any offer of employment is automatically withdrawn. Any background screening will be conducted by Syntel or a third party in accordance with the terms of the Fair Credit Reporting Act and applicable state or local law

I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, if any falsified statements, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated.

I authorize investigation of all statements contained in this application for any employment related purpose. I authorize the listed references and all employers listed above to provide you with any and all applicable information they may have. I hereby release these references and former employers from all liability for any information they may give to Syntel.

I understand that the Immigration Reform and Control Act of November 6, 1986 requires me to prove the legality of my residency or citizenship. I am also aware that the failure to provide such proof at the time of request may legally force my termination.

I agree that this application is not an offer of employment. I agree that if I am employed by Syntel (1) that my contract of employment is at will and may be terminated at any time, with or without notice and with or without cause at the option of either Syntel or myself; (2) that I will receive wages and benefits and be subject to rules and regulations and that such wages, benefits, rules and regulations are subject to change by Syntel at any time with or without notice to me; (3) that in partial consideration for my employment, I shall not commence any action or other legal proceeding relating to my employment or the termination thereof more than six months after the event complained of and agree to waive any statute of limitations to the contrary; (4) that my assigned work hours may be modified by Syntel and if requested, I will be required to work overtime; (5) that this constitutes the entire agreement between Syntel and myself regarding the stated subject matters and that any and all prior agreements are null and void, and that nothing in any documents published by Syntel, either before or after this agreement, shall in any way modify the above terms; (6) that subject to the National Labor Relations Act as well as other federal, state or local laws, this agreement cannot be modified by any oral or written representations made by anyone employed by Syntel, either before or after this agreement is signed, except by a written document directed exclusively to me and signed by an authorized Human Resources representative of Syntel.

DISCLOSURE AND RELEASE

In connection with my application for employment (including contract for services) with you, I understand that consumer reports may be requested. These reports may include, but not by way of limitation, the following types of information: Names and dates of previous employers, reason for termination of employment, job performance, work experience, accidents, etc. I further understand that such reports may contain information concerning my driving record, workers' compensation claims, credit history (to include obtaining any appropriate credit reports), bankruptcy proceedings, criminal records, school records, social security numbers and date of birth verification from the Social Security Administration, etc., from federal, state, other agencies and former employers which maintain such records. All those contacted will be held harmless and free of any legal liability.

I AUTHORIZE, WITHOUT RESERVATION, ANY COMPANY, PARTY OR AGENCY CONTACTED BY **SYNTEL**, **INC.** TO FURNISH THE ABOVE MENTIONED INFORMATION.

I have the right to make a request to the aforementioned companies, upon proper identification and notice, to obtain the nature and substance of all information they provided by virtue of this release.

I hereby authorize procurement of consumer report(s). This authorization shall remain on file and shall serve as ongoing authorization for you to procure consumer reports at any time during my employment (or contract) period.

Date	
Should any provision of this agreement be deemed modified only to the extent necessary to render the will be construed as if it never contained the illega	provision legal and enforceable and the agreemen
I have read, understand and agree to the above s	tatements and conditions of employment.
Applicant's signature	Date

Name