HR Information Form

Employee Info

FIRST NAME	MIDDLE NAME	LAST NAME
No Name Given		Marvin

PHONE NUMBER	EMAIL ADDRESS	JOB TITLE
(408) 646-5195	marvin_singhria@icloud.com	Security Officer

Address

4261 Stevenson Blvd. #192

CITY	STATE	ZIP
Fremont	CA	94538

Licensing

BSIS GUARD CARD #	GUARD CARD EXPIRY	FIREARMS PERMIT
6721692	10/31/2027	No

DRIVER'S LICENSE #	DL EXPIRY
W1592232	07/05/2003

Employment

HIRE TYPE	EMPLOYMENT STATUS	DATE OF HIRE
New Hire	Full-Time	11/12/2026

PAY RATE	PAY FREQUENCY	JOB SITE
21.00	Weekly	Aivres Syst - RD Lab Fremont

Work Schedule

		START	END
[X]	MON		
[X]	TUE		
[X]	WED		
[X]	THU		

		START	END
☐	FRI		
☐	SAT		
☒	SUN		

HR Representative

EMPLOYER / HR REPRESENTATIVE NAME

Rachel Resurreccion

Company Details

COMPANY NAME	EIN	STATE TAX ID (ENTITY ID)
Hammer Head Protection Inc	45-4415633	3432707