

PASSPORT SERVICE FORM

FREE OF CHARGE

[Please write **clearly** in **Capital Letters** in **Blue / Black ink** only]



**EMBASSY OF INDIA
BAHRAIN**

P.O. BOX 26106, ADLIYA
TEL : 00973 17712683
FAX : 00973 17710329

WEBSITE: www.indianembassybahrain.com

PLEASE TICK (✓) THE APPROPRIATE BOX(ES)	
<input type="checkbox"/>	NEW PASSPORT
<input type="checkbox"/>	EXTN. OF VALIDITY OF SHORT-TERM PASSPORT
<input type="checkbox"/>	NEW PASSPORT FOR LOST / DAMAGED PASSPORT
<input type="checkbox"/>	PASSPORT FOR MINOR BORN IN BAHRAIN
<input type="checkbox"/>	CHANGE OF NAME / SURNAME
<input type="checkbox"/>	CHANGE IN APPEARANCE
<input type="checkbox"/>	EMERGENCY CERTIFICATE
<input type="checkbox"/>	MISCELLANEOUS SERVICE (See col.22)

**PASTE A RECENT *
PASSPORT SIZE
PHOTO HERE
&
Put signature / thumb
impression **within**
space given below**

1. FULL NAME (NO INITIALS)

(NAME) [Not more than 34 characters] _____ (SURNAME)

2. FULL PREVIOUS NAME, IF ANY [GIVE DOCUMENTARY PROOF OF CHANGE OF NAME AFTER MARRIAGE OR OTHER WISE]

3. SEX (M / F)	4. DATE OF BIRTH	5. PLACE OF BIRTH
-------------------------	-------------------------	--------------------------

6. FULL NAME OF FATHER	NATIONALITY
-------------------------------	--------------------

7. FULL NAME OF MOTHER	NATIONALITY
-------------------------------	--------------------

8. FULL NAME OF WIFE / HUSBAND, IF ANY	NATIONALITY
---	--------------------

9. VISIBLE DISTINGUISHING MARKS, IF ANY	HEIGHT	M	Cms
--	---------------	----------	------------

10. EDUCATIONAL QUALIFICATION(S)	11. PROFESSION / OCCUPATION
---	------------------------------------

12. INDICATE CURRENT 'EMIGRATION CHECK' STATUS IN THE PASSPORT (PLEASE TICK (✓) ONE)
 EMIGRATION CHECK REQUIRED (ECR) EMIGRATION CHECK NOT REQUIRED (ECNR)

13. TOTAL PERIOD OF RESIDENCE ABROAD	YEARS	MONTHS
---	--------------	---------------

14. PASSPORT NO.	DATE OF ISSUE
-------------------------	----------------------

PLACE OF ISSUE	DATE OF EXPIRY
-----------------------	-----------------------

15. FULL PERMANENT ADDRESS IN INDIA	FOR OFFICE USE ONLY	
		INITIALS WITH DATE
	ENTERED	
	SCANNED	
	CHECKED	

16. FULL CURRENT RESIDENTIAL ADDRESS IN BAHRAIN POST BOX NO.: TEL. NO. MOB. NO.	CLEARED	
	GRANTED	

17. FULL NAME AND ADDRESS OF PERSON TO BE INTIMATED IN THE EVENT OF ANY EMERGENCY

TEL. NO. MOB. NO.

18. CITIZEN OF INDIA BY BIRTH DESCENT REGISTRATION NATURALISATION

19. IF APPLYING FOR DUPLICATE PASSPORT, WAS THE CURRENT PASSPORT LOST OR DAMAGED

20. PLEASE GIVE DETAILS OF PREVIOUS NATIONALITY OR TRAVEL DOCUMENT OF A FOREIGN COUNTRY, IF ANY

PREVIOUS TRAVEL DOCUMENT NO :

DATE OF ISSUE :

PLACE OF ISSUE :

21. TICK 'YES' OR 'NO' IN RESPECT OF THE FOLLOWING QUESTIONS :-

- A) WHETHER YOU WERE EVER REFUSED / DENIED A PASSPORT ? YES NO
- B) WHETHER YOUR PASSPORT WAS IMPOUNDED OR REVOKED ? YES NO
- C) WHETHER YOU WERE EVER CONVICTED FOR ANY CRIMINAL OFFENCE & SENTENCED TO IMPRISONMENT IN INDIA FOR TWO YEARS OR MORE ? YES NO
- D) WHETHER ANY CRIMINAL PROCEEDINGS ARE PENDING AGAINST YOU IN INDIA ? YES NO
- E) WHETHER YOU HAVE APPLIED FOR / GRANTED POLITICAL ASYLUM BY ANY FOREIGN GOVERNMENT ? YES NO

IF THE ANSWER TO ANY OF THE ABOVE IS 'YES' PLEASE FURNISH FULL DETAILS SEPARATELY AND ENCLOSE 'NO OBJECTION CERTIFICATE' FROM COMPETENT AUTHORITY OR COURT

22. FOR MISCELLANEOUS SERVICE PLEASE WRITE WHETHER IT IS FOR A) CHANGE OF ADDRESS
B) ENDORSEMENT OF SPOUSE'S NAME C) DELETION OF NAME OF CHILD / SPOUSE D) PCC
E) ANY OTHER (PLEASE SPECIFY)

DECLARATION

I OWE ALLEGIANCE TO THE SOVEREIGNTY & INTEGRITY OF INDIA AND HAVE NOT ACQUIRED CITIZENSHIP OR TRAVEL DOCUMENT OF ANY OTHER COUNTRY. I HAVE NOT LOST / SURRENDERED / BEEN DEPRIVED OF CITIZENSHIP OF INDIA.

THE INFORMATION GIVEN BY ME IN THIS FORM AND ENCLOSURES IS TRUE AND I AM SOLELY RESPONSIBLE FOR ITS ACCURACY. I AM AWARE THAT IT IS AN OFFENCE UNDER PASSPORT ACT, 1967 TO FURNISH ANY FALSE INFORMATION OR TO SUPPRESS ANY MATERIAL INFORMATION WITH A VIEW TO OBTAINING PASSPORT OR ANY OTHER TRAVEL DOCUMENT.

I FURTHER DECLARE THAT I HAVE NO OTHER PASSPORT / TRAVEL DOCUMENT.

PLACE : BAHRAIN

DATE :

(Signature or thumb impression of applicant)

Declaration by Parents / Legal Guardian in case of Minor

- 1) Information given above in respect of _____, of whom I am the parent / legal guardian, is true.
- 2) I undertake to be entirely responsible for his / her expenses.
- 3) I solemnly declare that he / she has not lost, surrendered or been deprived of his / her citizenship of India.
- 4) In case application is submitted on behalf of _____ for acquiring any other citizenship / travel documents, I undertake to inform the Embassy of India, Bahrain, immediately so that the travel document issued in favour of the minor may be withdrawn.

Signature of Father

Signature of Mother

Signature of Legal Guardian

ADDITIONAL INFORMATION (IF ANY)