

## EMBASSY OF INDIA, DAMASCUS (SYRIA)

## **VISA APPLICATION FORM**

## Part 'A'

## (TO BE FILLED BY ALL APPLICANTS)

PLEASE AFFIX ONE PASSPORT SIZE PHOTOGRAPH HERE

| 1. (a) Full name Mr./ Mrs. / Miss              |     | :                        |            |                  |      |                             |  |         |  |  |  |
|--|-----|--------------------------|------------|------------------|------|-----------------------------|--|---------|--|--|--|
|  |     |                          |            |                  |      |                             |  |         |  |  |  |
| (b) Previous Name, if any                      |     | :                        |            |                  |      |                             |  |         |  |  |  |
| 2. (a) Present Nationality                     |     | :                        |            |                  |      |                             |  |         |  |  |  |
| (b) Any other nationality, present or previous |     | :                        |            |                  |      |                             |  |         |  |  |  |
| 3. (a) Father's Name & Nationality             |     | :                        |            |                  |      |                             |  |         |  |  |  |
|  |     |                          |            |                  |      |                             |  |         |  |  |  |
| (b) Husband's/Wife's Name                      |     |                          |            |                  |      |                             |  |         |  |  |  |
| 4. Place of Birth:                             |     |                          |            |                  |      |                             |  |         |  |  |  |
| (In <b>BLOCK</b> Letters)                      |     | City                     |            | State / Province |      |                             |  | Country |  |  |  |
| 5. Date of Birth:                              | Day | Month                    |            | Year             |      |                             |  |         |  |  |  |
| 6. Address :                                   |     |                          |            |                  |      |                             |  |         |  |  |  |
| Phone No. :                                    |     |                          |            |                  |      |                             |  |         |  |  |  |
| 7. Profession (Detain present employment)      |     |                          |            |                  |      |                             |  |         |  |  |  |
| 8. Passport No                                 |     | Date                     |            | Issued           | l by |                             |  |         |  |  |  |
| Place of Issue: Expiring on :                  |     |                          |            |                  |      |                             |  |         |  |  |  |
| 9. Children included (To be filled only        |     |                          | ing the ap | oplicant)        |      |                             |  |         |  |  |  |
| Name   |     | Place & Date<br>of Birth |            | Sex Relationship |      | Identification mark, if any |  |         |  |  |  |
|  |     |                          |            |                  |      |                             |  |         |  |  |  |
|  |     | 1                        |            |                  | +    |                             |  |         |  |  |  |

<sup>\*</sup>Please indicate name of the Organisation where employed along with the post held.

| -   | -   |   |  |
|---|---|---|--|
|   | required:   |   |  |
|   | (1) Single  | (2) Double  | (3) Triple/ Multiple   |
| -   |   |   |  |
| •   | (1) Transit   | (2) Tourist   | (3) Business   |
|   | (4) Education   | (5) Any other (spec   | ify) :   |
| 15. Place(s) in India to be visite                          | ed :  |   |  |
| 16. (a) Approximate Date of A                               | arrival in India :  |   |  |
| (b) Approximate Date of D                                   | Departure from India _  |   |  |
| 17. (a) Port of first entry into                            | India :   |   |  |
| (b) Port of final departure                                 | from India:   |   |  |
| 18*. Declaration to be made by                              | applicants seeking to   | stay in India for more than o                                   | ne year:   |
| "I hereby undertake that I s<br>In case I am found positive |   |   | AIDS within one month of arrival in India.   |
|   |   |   | (Signature of Applicant)   |
| (TO BI  | E FILLED BY ALL   | <u>PART 'B'</u><br>APPLICANTS EXCEPT F                          | OR TOURIST VISA)   |
| Whether holding valid                                       | "No objection to retu   | rn to India" endorsement and                                    | l if so, give particulars :  |
| 2. Name and address of ty                                   | _   |   |  |
| (A) In the country of A                                     |   |   |  |
| ()  |   |   |  |
| (B) In India  | i)  |   |  |
|   | /   |   |  |
|   |   | PART 'C'  |  |
|   | (TO BE FIL  | LED IN BY ALL APPLICA   | ANTS)  |
| India for the purpose for w up business or extend my s      | thich visa has been ap<br>tay for any other purp<br>any information is four | plied and shall not, on arrivationse. I fully understand that i | undertake that I shall utilize my visit to<br>al in India, try to obtain employment or se<br>f any of the particulars furnished above are<br>e visa is liable to be cancelled at any time. |
| Date:   |   |   | (Signature of Applicant)   |
|   |   | R OFFICIAL USE ONLY)  |  |
| 1. No, Date and Type  | of Visa issued :  |   |  |
| 2. Amount of Visa Fe  | e received :  |   |  |
| 3. Date on which pass                                       | sport returned to applie  | cant :  |  |

<sup>\*</sup> Please strike-off if not applicable.