



SL. No. EAPX - 1 - 04
From No 1 External

POLAROID/INSTANT PHOTOS NOT
ACCEPTABLE

Free of charge

GOVERNMENT OF INDIA
(APPLICATION FORM FOR INDIAN PASSPORT AT AN INDIAN MISSION/POST)

(for the issue of an ordinary international passport
Fresh / After 10 years (final) / and for duplicate
in lieu of lost / damaged passport

Paste your unsigned
recent colour
photograph.
Size: 3.5 X 3.5 cm

Specimen Signature

--

Payment of Fee (to be filled by applicant)

Amount paid \$/E ..

by ..

Mode of payment

For delivery by mail \$/E ..
passport.

extra to be paid as postal charges for each

1. (a) Full Name

[illegible]

(expanded initials)

(Surname)

(b) Aliases, if any

(c) Has applicant ever changed his/her name ? Is so, give previous name in full

[illegible]

(d) Sex ☒ Male ☐ Female ☐ Other

(e) Phone No 065243659 Mobile 0168794235
Email ID thana1624@yahoo.com

2.Date of birth 0 4 0 4 1 9 8 4

Place of birth

P U L I Y A N G U D I

Country of Birth

I N D I A

(a) Height 1 5 6 (cms) (b) Colour of eyes B L A C K

(c) Colour of Hair B L A C K

(d) Visible distinguishing marks, if any NO

3. Permanent Address :

(a) In India

N O . 5 A , N . N O 4 5 A M B E D K A R
 4 T
H S T C H I N A T H A M A N I P U L I Y A N
 G U D
I S I V A G I R I T K

(b) In County of domicile

3 3 , J L N B U K I T B I N T A N G K U A
 L A
L U M P U R

4. (i) Name of Father

K	A	R	U	P	P	I	A	H														

Country of his birth

I	N	D	I	A																		
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--

(ii) Name of Mother

K	A	R	U	P	P	A	M	M	A	L												

Country of her birth

I	N	D	I	A																		
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--

(iii) Nationality of father at the time of applicant's birth

I	N	D	I	A																		
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(iv) Nationality of mother at the time of applicant's birth

I	N	D	I	A																		
---	---	---	---	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

5. ☐ Married ☒ Unmarried

6. Name and Nationality of Spouse

7. Particulars of person to be intimated in the event of death or accident:

Name KUMAR

Address 4 JALAN BESAR AMPANG SELANGOR

8. Present Passport/ nationality, identity card, if any No J1944373

Date and

Place of issue 28/06/2010

9. Local car driving Licence No Date and Place of issue

10. Educational qualification GRADE TEN
(In order to determine emigration status)

11. When did applicant first leave India? 18 MAY 2017 When was he/she in
India last? 18 MAY 2017

12. How long has applicant continuously resided abroad? 2YEARS

13. Present Emigration Status (ECR or ECNR) ECR ECNR
(With documentary evidence)

14. Profession and business address
Telephone

15. Please mention, if citizen of India by birth/descent/nationalization/Registration
BY BIRTH

16. Did applicant ever possess any other nationality or travel document of any other country? Yes ☐
No ☒

17. Was applicant ever refused an Indian Passport? Yes ☐ No ☒

18. Was applicant's passport ever impounded/revoked? If so, details please. Yes ☐ No ☒

19. Name and address of two relatives/friends

(1) (2)
.....
.....
.....

20. Is applicant in Govt. Service/Public Undertaking Service/Statutory Bodies Service of India? If so,
Please give details and enclose 'No objection Certificate' from your employer in original

21. (i) Are any criminal proceedings pending against applicant in any court in India? So, please give
details

(ii) Has applicant ever been repatriated from abroad to India at the expenses of the Govt. of India ? If
so, details please

22. No. of lost/damaged passport J1944373 place of issue
MADURAI Date of issue Valid
until 27-06-2020

23. (i) Briefly state circumstances of loss/theft/damage of passport on a plain paper and attach copy of report lodged with local police in case of loss/theft

(ii) Give details of restriction, if any, put on applicants's damaged/lost passport.

(iii) Did applicant avail transfer of residence, foreign travel scheme facility on lost/damaged passport ?
if so, details please

24. Is applicant registered with Indian Mission/Post ? If not, is he a member of any Indian Organisation ?

25. Particulars of children, if any, to be deleted

Name	Place & Date of birth	(M/F)
.....
.....
.....
.....
.....
.....

Note : Separate passport will be issued to children of all ages. However, children below 18 years of age will be given a 5-year maximum validity passport

26. DECLARATION :

I owe allegiance to the sovereignty, unity & integrity of India and have not voluntarily acquired the citizenship or travel document of another country. I have not lost, surrendered or been deprived of citizenship of India.

The information given by me is true and I am solely responsible for its accuracy. I am aware that it is an offence under the 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.

Signature/Thumb Impression of applicant
(Left Hand T.I. if male and right Hand T.I. if female)

Date /Place

27. In case of minors, following passport particulars of both parents must be given:

Mother

Father

(a) Passport No :

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

--

(b) Date of Issue :

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--

--

(c) Place of Issue :

.....

.....

(d) If parents have applied for
A passport, please give
File No & date

.....

.....

28 Declaration of Parents or Guardian if passport is for minor :
(To be signed by both Parents or Guardian)

We affirm that the particulars given above are in respect of (Name) ..
Son / daughter of Smt .. Sh ..

of whom we are the Parents / Guardian. We undertake the entire responsibility for his/her expenses.
We solemnly declare that he/she has not lost, surrendered or been deprived of his/her citizenship of
India and that the information given in respect of him/her in this application is true. It is also certified
that the name of the child mentioned is not included in passport of either parent.

..... AND OR

Mother

Father

Guardian

Name & Signature/ T.I of both the Parents/Guardian (left hand T.I. if male and Right hand T.I .if
female)

Place Date.....

29. Specimen signature or T.I.within the Space given below :

--

--

FOR OFFICE USE ONLY