

## **VISA APPLICATION FORM**

CONSULATE GENERAL OF INDIA CONSULAR WING 540 ARGUELLO BLVD., SAN FRANCISCO, CA 94118 TEL: (415) 668-0662/0683 FAX: (415) 668-9764 STAPLE TWO PHOTOS HERE

http://www.cgisf.org

APPLICATIONS ARE ACCEPTED AT THE COUNTER FROM 9:00am To 12:00pm (MON. to FRI.) ONLY

Note: This application can be used at the Consulate General of India, San Francisco or at any other Consulate Generals/Embassy of India provided the applicant resides in States of Consulate's jurisdiction.

## PLEASE READ THE INSTRUCTIONS CAREFULLY BEFORE FILLING THE APPLICATION

(PLEASE PRINT IN BLOCK LETTERS ONLY)			FOR OFFICE USE ONLY	7	
1. FULL NAME:					
(First) (Middle) (Last		ast)			
2. LAST NAME AT BIRTH (IF DIFFERENT):					
3. MARITAL STATUS:  Married Unmarried					
4. DATE OF BIRTH					
6. PLACE OF BIRTH (CITY, STATE & COUNTRY):					
7. CURRENT NATIONALITY:					
8. ARE YOU A PERMANENT/LONG-TERM RESIDENT IN USA? Yes No					
If yes please furnish photocopy of your GREEN-CARD(both sides)/Long-term Visa Status: (For Non-US passport holders only)					
9. NATIONALITY AT BIRTH:					
10. ANY OTHER NATIONALITY HELD AT PRESENT/PAST(Are you in possession of any other passport?):					
11. PRESENT ADDRESS:					
12. PHONE (HOME):	13. PHONE (WORK):		14. E-Mail:		
15. PERMANENT ADDRESS:					
16. PROFESSION:					
17. EMPLOYER'S NAME AND ADDRESS:					
18. PASSPORT NUMBER:		19. VALID UNTIL:			
20. ISSUED AT:		21. ISSUE DATE:			
22. FATHER'S NAME:		23. NATIONALITY OF FATHER:			
24. NAME & NATIONALITY OF SPOUSE:		25. NAME AND NATIONALITY OF MOTHER			
26. TYPE OF VISA REQUIRED (check one): Tourist   Business   Student   Entry   Journalist, Conference   Employment, Transfer   Transit (for short stopover when traveling to a 3 <sup>rd</sup> country)					
27. PERIOD OF VISA (check one):  Days (for Transit with confirmed onward ticket only), Six Months  , One Year  , Five Years  , PAGE 1 of 5 Ten Years (for U.S. Citizens only, 6 months each stay)					

28. HAVE YOU EVER VISITED INDIA BEFORE? If yes, give address where you stayed with dates or years:
29. HAS INDIAN VISA OR EXTENSION OF THE SAME EVER REFUSED TO YOU PREVIOUSLY?
Yes No If yes, give details:
30. ARE YOU HOLDING A VALID "NO OBJECTION TO RETURN TO INDIA" ENDORSEMENT?
Yes No If yes, give details:
31. PURPOSE OF VISIT: 32. PLACES OF VISIT:
33. ARE YOU TRAVELLING ON BEHALF OF A COMPANY?
Yes No
34. IF YES, GIVE NAME AND ADDRESS OF COMPANY:
35. EXPECTED DATE OF DEPARTURE FROM USA: (All Visas are valid from date of issue irrespective of applicant's date of departure)
36. EXPECTED DATE OF ARRIVAL IN INDIA:
37. PORT OF ARRIVAL IN INDIA:
38. ARE ANY CHILDREN IN YOUR PASSPORT ACCOMPANYING YOU?
Yes No If yes, give details:
Full Name Date of Birth Sex
(b)
39. NAME AND ADDRESS OF TWO REFERENCES: (a) In India:
(b) In applicant's country:
I, hereby undertake that I structured in the purpose for which the visa has been applied for and shall not, on arrival in India, try
utilize my visit to India for the purpose for which the visa has been applied for and shall not, on arrival in India, troobtain employment or set up business or extend my stay for any other purpose.
obtain employment of set up outsiness of extend my stay for any other purpose.
Signature of Applicant
(In case of minor Parent/Legal
Guardian may sign application
Place:
Date: