



E.A.(P)-2EXTERNAL

GOVERNMENT OF INDIA

APPLICATION FORM FOR MISCELLANEOUS SERVICES ON INDIAN PASSPORTS

(For use in Indian Mission/Post)

(a) Renewal (b) Change of Address (c) PCC (d) Additional Endorsement (e) Child Deletion (f) Any other Service

(Please delete inapplicable)

Applicant must paste
(40 X 40 mm) one
photograph here with
half the signature
on the photograph and
half on the application

Payment of Fee (to be filled by applicant)

Amount paid Euro _____ by _____ (Mode of Payment)

1. Full Name _____

2. Applicant's Date of Birth _____ Place of Birth _____

3. Residential address:

(i) In India

(ii) In country of domicile
(Present)

Tel.: _____

Tel.: _____

4. Profession and business address _____
_____ Tel.: _____

5. Is applicant registered with the Indian Mission/Post? If not is he a member of any Indian Organisation?
Give details.

6. (i) Name of Father _____
(ii) Name of Mother _____
(iii) Name of Spouse & Nationality _____

7. Current Passport No. _____ Valid until _____
Place of issue _____ Date of issue _____

8. Particulars of children to be deleted:

Name	Place & Date of Birth	Sex (M/F)
_____	_____	_____
_____	_____	_____
_____	_____	_____

9. DECLARATION

I solemnly affirm that:
(i) I owe allegiance to the sovereignty and integrity of India
(ii) Information given above is correct and nothing has been concealed and I am aware that it is an offence under the Passport Act 1967 to knowingly furnish false information or suppress material information; and
(iii) I undertake to be entirely responsible for expenses of my son/daughter/ward

Signature/T.I. of applicant or legal
Guardian (Left hand thumb impression of
male and right hand thumb impression of female)

10. Two specimen signatures or thumb impressions required for service within the space given below:

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FOR OFFICE USE
