



ASST HIGH COMMISSION OF INDIA RAJSHAHI
HOUSE NO-284, SECTOR-2, HOUSING ESTATE
 UPOSHAHAR, RAJSHAHI

Paste your unsigned recent color photograph. Size: 2" X 2"

00880721861213



Visa Application Form

Signature



BGDRV2C5D522

A. Personal Particulars (As in Passport)				
Surname (As in Passport)		HASAN		
Given Name (As in Passport)		MD MOSSARROF		
Previous/other Name if any		Not Applicable		
Gender	MALE	Marital Status	MARRIED	
Date of Birth	01-JAN-1990	Religion	ISLAM	
Place of Birth Town/City	RAJSHAHI	Country of Birth	BANGLADESH	
Citizenship /National ID No	5968269703	Educational Qualification	POST GRADUATE	
Visible identification marks		NIL		
Current Nationality	BANGLADESH	Nationality by Birth/ Naturalization	BY BIRTH	
Any Other Previous/Past Nationality		Not Applicable		
B. Passport Details				
Passport No.	A05060936	Date of Issue (dd/mm/yyyy)	10-OCT-2022	
Place of Issue	DHAKA	Date of Expiry (dd/mm/yyyy)	09-OCT-2027	
Any other Passport/Identity Certificate held (if yes ,please fill in the following)			NO	
Country of Issue		Place of Issue		
Passport/IC No.		Date of issue (dd/mm/yyyy)		
Nationality/Status				
C. Applicant's Contact Details				
Present Address	GOCHA MOHANPUR GOCHA 6220 RAJSHAHI RAJSHAHI, BANGLADESH 6220	Phone No	01723542273	
		Mobile /Cell No	88001723542273	
		Email address	MOSSARROFH@GMAIL.COM	
Permanent Address	GOCHA MOHANPUR GOCHA 6220 RAJSHAHI RAJSHAHI			
D. Family Details				
Relation	Name	Nationality	Prev. Nationality	Place/Country of Birth
Father's	MD HOSEN ALI	BANGLADESH	BANGLADESH	RAJSHAHI BANGLADESH
Mother's	MST AESHA BEGOM	BANGLADESH	BANGLADESH	RAJSHAHI BANGLADESH
Spouse	ARJINA KHATUN	BANGLADESH	BANGLADESH	RAJSHAHI BANGLADESH
Were your Grandfather/Grandmother(Paternal/Maternal) Pakistan Nationals Or belong to Pakistan held area : NO				

Web Registration Date : 26-OCT-2022 Application Id : BGDRV2C5D522



MD MOSSARROF HASAN

E. Details of Visa Sought (Visa shall be valid from the Date of Issue and not from the Date of Journey)			
Type Of Visa Required	MEDICAL VISA	No of Entries	MULTIPLE
Period of Visa (Month)	6 Month	Expected Date of Journey	20-NOV-2022
Port Of Arrival	BY AIR/ HARIDASPUR	Port of Exit	BY AIR/ HARIDASPUR
Required Detail of	MEDICAL VISA		
Hospital Name	MGM HEALTHCARE		
Address	NO 54, OLD, 72, NELSON MANICKAM RD, AMINJIKARAI, C		
Doctor Name			
Phone/Fax			
Details			
Purpose of Visit : FOR FOREIGN NATIONALS COMING AS MEDICAL ATTENDANTS			
F. Previous Visit Details			
Have You Ever visited India ?	NO		
Address where You stayed in India			
Cities in India Visited			
Type of Visa		Visa Number	
Visa Issued Place		Date of Issue	
Countries visited in last 10 years			
Have you been refused an Indian Visa or extension of the same previously or deported from India ?	NO		
G. Profession/Occupation Details :			
Present Occupation	GOVERNMENT SERVICE	Designation/Rank	LECTURER
Employer name/business	RAJSHAHI CADET COLLAGE		
Employer Address	SARDA RAJSHAHI		
Phone Number			
Past occupation if any			
Are/have you worked with Armed forces/ Police/ Para Military forces ?	NO		
Organization		Designation	
Place of Posting		Rank	
H. Address of Place of Stay / Hotel			
Place/Hotel Name	Address of Place / Hotel	State	Phone No
1	MD TUHIN MAHMUD DOULOTPUR HATGACHE ETAHAR MALDA MALDA WEST BENGAL.		+919851242825,
2	.		
3	.		
4	.		
I. Details of Two Reference			
	In India	In BANGLADESH	
Name	MD TUHIN MAHMUD	ARJINA KHATUN	
Address	DOULOTPUR HATGACHE ETAHAR MALDA MALDA WEST BENGAL	GOCHA MOHANPUR GOCHA 6220 RAJSHAHI	
Phone Number	+919851242825	01723542273	
K. DECLARATION			
a. I do not hold any other passport(s) other than those detailed above.			
b. I have read and understood all the conditions for the visit to India and I am willing and able to abide fully by them.			
c. I declare that the information given in the form is complete and correct and the visit to India will be undertaken for the purpose indicated in the application.			
d. I understand that in case the information provided in the form is found to be incorrect, I will be liable for denial of visit/ entry or deportation and/ or other penalties during the visit as provided by Indian law.			
e. I will also submit hard-copy all the uploaded documents along with the print of application to submit to the concerning Indian Mission or Agency for processing of visa application.			

Application Id : BGD RV2C5D522

26-OCT-2022

Date :

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Applicant's signature (as in Passport)