



सत्यमेव जयते

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

UPOSHAHAR, RAJSHAHI

00880721861213



Visa Application Form



BGDRV06D5023

Signature

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

A. Personal Particulars (As in Passport)				
Surname (As in Passport)	BEGUM			
Given Name (As in Passport)	RONZINA			
Previous/other Name if any	Not Applicable			
Gender	FEMALE	Marital Status	MARRIED	
Date of Birth	01-JUL-1956	Religion	ISLAM	
Place of Birth Town/City	RANGPUR	Country of Birth	BANGLADESH	
Citizenship /National ID No	1024746016	Educational Qualification	HIGHER SECONDARY	
Visible identification marks	NA			
Current Nationality	BANGLADESH	Nationality by Birth/ Naturalization	BY BIRTH	
Any Other Previous/Past Nationality	Not Applicable			
B. Passport Details				
Passport No.	A06036098	Date of Issue (dd/mm/yyyy)	12-DEC-2022	
Place of Issue	DHAKA	Date of Expiry (dd/mm/yyyy)	11-DEC-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	HOUSE- 26, DHAP LALKUTI LEN RANGPUR SADAR RANGPUR, BANGLADESH 5400	Phone No	01735980521	
		Mobile /Cell No	8801735980521	
		Email address	INFO.DOCTORLINKBD@GMAIL.COM	
Permanent Address	HOUSE- 26, DHAP LALKUTI LEN RANGPUR SADAR RANGPUR			
D. Family Details				
Relation	Name	Nationality	Prev. Nationality	Place/Country of Birth
Father's	BACCHA MIA	BANGLADESH	BANGLADESH	RANGPUR BANGLADESH
Mother's	ROHIMA BEGUM	BANGLADESH	BANGLADESH	RANGPUR BANGLADESH
Spouse	SAMSUL HAQUE BOSUNIA	BANGLADESH	BANGLADESH	RANGPUR BANGLADESH
Were your Grandfather/Grandmother(Paternal/Maternal) Pakistan Nationals Or belong to Pakistan held area : NO				



RONZINA BEGUM

Web Registration Date : 05-FEB-2023 Application Id : BGDRV06D5023

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)	12 Month	Expected Date of Journey	18-FEB-2023
Port Of Arrival	BY ROAD CHANGRABANDHA	Port of Exit	BY ROAD CHANGRABANDHA
Required Detail of MEDICAL VISA			
Hospital Name	FORTIS HOSPITAL		
Address	730, ANANDAPUR, E.M. BYPASS ROAD, KOLKATA		
Doctor Name	DR SATYAM CHAKRABORTY		
Phone/Fax	033 6628 4444		
Details	ENDOCRINOLOGY		
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	NA		
Have you been refused an Indian Visa or extension of the same previously or deported from India ?	NO		
G. Profession/Occupation Details :			
Present Occupation	RETIRED	Designation/Rank	PHOTOCOPY OPERATOR
Employer name/business	GE ARMY		
Employer Address	RANGPUR CANTONMENT		
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	FORTIS HOSPITAL 730, ANANDAPUR, E.M. BYPASS ROAD, KOLKATA KOLKATA WEST BENGAL.		033 6628 4444,
2	.,		
3	.,		
4	.,		
I. Details of Two Reference			
	In India	In BANGLADESH	
Name	DR SATYAM CHAKRABORTY	MD REZAUL KARIM BOSUNIA	
Address	730, ANANDAPUR, E.M. BYPASS ROAD KOLKATA KOLKATA WEST BENGAL	HOUSE- 26, DHAP LALKUTI, RANGPUR	
Phone Number	033 6628 4444	01755631647	
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 : BGDRV06D5023

05-FEB-2023

Date :

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Applicant's signature (as in Passport)