



ASST HIGH COMMISSION OF INDIA RAJSHAHI

HOUSE NO-284, SECTOR-2, HOUSING ESTATE

UPOSHAHAR, RAJSHAHI

00880721861213

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



Visa Application Form

Signature

A. Personal Part	iculars (As in Passp	ort)							
Surname (As in Passport)			ANAMIKA							
Given Name (As in Passport)			SIDRATUL MUNTAHA							
Previous/other Name if any		Not Applicable								
Gender		FEMALE		Marital Status				SINGLE		
Date of Birth		01-JAN-2004		Religion				ISLAM		
Place of Birth Town/City		LALMONIRHAT		Country of Birth				BANGLADESH		
Citizenship /Na	tional IE) No	1523739819		Educational Qualification			HIGHER SECONDARY		
Visible identific	cation m	arks	NA							
Current Nationality		BANGLADESH		Nationality by Birth/ Naturalization			BY BIRTH			
Any Other Prev	/ious/Pa	st Nationa	ity		Not Applicable					
B. Passport Deta	ails									
Passport No.		A1380712	28	Date of I	Date of Issue (dd/mm/yyyy)		уу)	28-JAN-2024		
Place of Issue		DHAKA		Date of E	ate of Expiry (dd/mm/yyyy)		27-	27-JAN-2034		
Any other Passp	ort/Ident	ity Certifica	te held (if yes ,please fill in	the following	he following)			NO		
Country of Issu	ıe			Place of Issue						
Passport/IC No.				Date of i	Date of issue (dd/mm/yyyy)					
Nationality/Sta	tus									
C. Applicant's C	ontact De	etails								
Present		DOKKHIN GODDIMARI, WARD - 06		Phone N	Phone No 01		01710213	1710213150		
Address		HATIBANDHA LALMONIRHAT, BANGLADESH 5530		Mobile /	e /Cell No 88017102		13150			
				Email ad	address HRBAPPI		2374@GMAIL.COM			
Permanent 06 Address HATIE				I, WARD -						
D. Family Details	5									
Relation	Name			Nationali	ty	Prev	. Nationality	'	Place/Country of Birth	
Father's	MD ABDUR RAZZAK		BANGLA	ADESH	DESH BANGLADESH			LALMONIRHAT BANGLADESH		
Mother's	MST SERAJUM MONIRA AKTER		BANGLA	ADESH	BAN	GLADESH		LALMONIRHAT BANGLADESH		
Marital Status	Single									

Were your Grandfather/Grandmother(Paternal/Maternal) Pakistan Nationals Or belong to Pakistan held area: NO

E. Details of Visa Sought	etails of Visa Sought (Visa shall be valid from the Date of Issue and not from the Date of Journey)							
Type Of Visa Required		RIST VISA	No of Entries	MULT	IULTIPLE			
Period of Visa (Month)		onth	Expected Date of Journey	20-SE	P-2024			
Port Of Arrival B		OAD CHANGRABANDHA	Port of Exit	BY R	OAD CHANGRABANDHA			
Required Detail of TOUR	RIST V	/ISA						
Places to be Visited SIL		IGURI						
	WES	ST BENGAL						
Purpose of Visit: TOURISM,	Purpose of Visit: TOURISM,RECREATION,SIGHT-SEEING							
F. Previous Visit Details								
Have You Ever visited India '	?	NO						
Address where You stayed in India	า	,						
Cities in India Visited								
Type of Visa			Visa Number					
Visa Issued Place			Date of Issue					
Countries visited in last 10 y	ears	NA						
Have you been refused an In	dian \	/isa or extension of the same p	reviously or deported from Indi	ia ? N	0			
G. Profession/Occupation Details : of Father								
Present Occupation		STUDENT	Designation/Rank	PF	PROPRIETOR			
Employer name/business		MS ABDUR RAZZAK TREADS						
Employer Address Phone Number		DOKKHIN GODDIMARI, HATIBANDHA, LALMONIRHAT						
Past occupation if any								
Are/have you worked with Armed forces/ Police/ Para Military				NC	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 MOUNT EMBASSY HOTEL SEVOKE, SILIGURI, WEST BENGAL 734001 JALPAIGURI WEST BENGAL. 353 246 0241,								
2 .,								
3 .,								
4 .,								
I. Details of Two Reference								

In I	ndia	In BANGLADESH		
Name	MOUNT EMBASSY HOTEL, SILIGURI	MD ABDUR RAZZAK		
Address	SEVOKE, SILIGURI	DOKKHIN GODDIMARI, WARD - 06		
	WEST BENGAL 734001 JALPAIGURI WEST BENGAL	HATIBANDHA, LALMONIRHAT		
Phone Number	353 246 0241	01717128316		

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.

	26-JUN-2024	
Date :		Applicant's signature (as in Passport)