

PLEASE
ATTACH
PHOTOGRAPH
HERE



सत्यमेव जयते

HON CONSUL OF INDIA
WESTERN AUSTRALIA

OFFICE: 2nd Floor, Suite 21 Lincoln House, 4 Ventnor Avenue
West Perth WA 6005
P.O Box 372 West Perth WA 6872
Tel: (08) 9486 9011 Fax: (08) 9486 9611 Mobile: 0412 709 729
Email: consul@wa1.quik.com.au
Consulate Hours: Mon-Fri 9:30am to 1pm

FOR OFFICE USE ONLY

REF NO _____

RECEIPT NO _____

DATE _____

VISA TYPE _____

VISA APPLICATION FORM
PART A

Please Note Visa is valid from the date of issue

1. Your full Name: Mr/Mrs/Miss/Ms: _____

Your Fathers's Name: _____

Your Spouse's Name: _____

Whether any children travelling with the applicant are included in your passport Yes/No?

If yes complete the following:

Name: _____ Date of Birth: _____ / _____ / _____

2. Permanent Address: _____ Postcode: _____

Present Address: _____ Postcode: _____

Tel. Number: (H) _____ (W) _____ (M) _____

3. Date of Birth: _____ / _____ / _____ Place of Birth: _____ Country of Birth: _____

4. Occupation: _____

5. Present Nationality: _____ Previous Nationality, if Any: _____

Passport Number: _____ Place of Issue: _____

Date of Issue: _____ Expiry Date: _____

Do you hold dual Nationality, if so, please state with particulars:

Country: _____ Passport No: _____

6. Have you visited India previously? Yes/No If so, Previous Visa No: _____

7. Purpose of Visit: (please tick)

TOURIST (Places to be Visited) _____

BUSINESS (Name of Company in Australia) _____
(Name of Company in India) _____

EDUCATION (Name of Institution) _____

FIVE YEAR VISA (For people of Indian Origin/their Spouse/and their children only)

ANY OTHER (Please Specify) _____

8. Date of entry into India _____ / _____ / _____ Date of Departure from India _____ / _____ / _____

Date and time of departure from Australia: _____ PTO

PART B

TO BE FILLED IN FOR BUSINESS, EMPLOYMENT, EDUCATION VISA APPLICATIONS

Name and address of Company/Person who will furnish financial guarantees for maintenance if referred to.

In country of applicant

In India

Name: _____

Name: _____

Company Name: _____

Company Name: _____

Address: _____

Address: _____

TO BE FILLED IN ONLY BY PEOPLE OF INDIAN ORIGIN APPLYING FOR A 5 YEAR VISA AND FOR VISITING RELATIVES

Name and address of Person who will furnish financial guarantees for maintenance, if referred to, in INDIA:

In country of applicant

In India

Name: _____

Name: _____

Company Name: _____

Company Name: _____

Address: _____

Address: _____

PART C

TO BE FILLED IN BY ALL APPLICANTS

I _____ hereby undertake that I shall utilise my visit to India for the purpose for which the visa has been applied for and shall not, on arrival in India, try to obtain employment or set up a business or extend my stay for any other purpose.

Date: ____ / ____ / ____ Signed: _____

(If applicant is a minor and unable to sign, parent/guardian signature required)

REQUIREMENTS FOR VISA

1. FEE (Please check with your travel agent or the Consulate Office)
Payment is made in CASH/MONEY ORDER/BANK CHEQUE only (No personal cheques please)
(Please note there will be no refund of any fee/charges in case of any change of type of visa or rejection of visa application)
2. PHOTOGRAPH
One current passport size photograph
3. FLIGHT DETAILS
A copy of the air ticket or flight schedule, showing date of entry and departure from India
4. PASSPORT
Your passport must be valid 6 months from the date of application and must contain one full sheet for affixing visas
5. A self addressed envelope pre-paid, registered or express post, if you require your passport to be returned by mail
6. For Business visa: A letter from the Indian Company / Local Company confirming the visit
(Purpose, length, expenses covered etc)
7. For Education visa: A letter from the school or institution confirming entrance. This must state the duration of the course
8. For Employment visa: A letter from the Company stating position and the copy of the contract.