Affix recent 2x2 photo

APPLICATION FOR NON-IMMIGRANT VISA FA FORM NO.2 (REVISED 2019) EMBASSY OF THE PHILIPPINES, NEW DELHI

For information pertaining the Philippine visas, please visit www.newdelhipe.dfa.gov.ph

| for information | in pertaining the Philippine vis | sas, piease visit | www.newdelli | ipe.uia.gov.pii |
|--|--|---|---------------------|--------------------|
| FOR OFFICIAL USE ONLY: Visa No | Sticker No. | | | |
| Service No. | OR # | Ar | nt. Paid | |
| Visa being applied for : 9A : Single Ent | | | 9A:1 year multi | ple entry [] |
| 98 } 90 | | 9G[] | 47A2 [] | |
| Surname : KYATANAVAR | Gender : Male // Female | | ate of Birth: | Age: 25 |
| Given Name : ANNAPPA | Nationality INDIA | Passport No. | V538019 | 6 |
| 1,,,,,,, | INDIK | Place of Issue : BENGALURU Date of Issue (dd/mm/yy): 10/12/2021 | | |
| Middle Name : | 1 | | | |
| | | | y (dd/mm/yy): c | 9/12/2031 |
| Civil Status : [Single Mai | | parated [][| Divorced | |
| Name of Father : MAHAVEE | <u>R</u> | | - | |
| Name of Mother : SHOBHA | | | | |
| Name of Spouse : N / A | | | | |
| Name of Children (under the age of 18 | 3): N/A | | | |
| | | | | |
| If you are less than 15 years old, pleas | e provide the name and your rela | ationship with yo | our travelling com | panion: N/A |
| Permanent Address in Home Country | 295 ATIPOST : TI | GADOLLE | TO' RAII | HONEAL |
| BELAGAVI PIN: 5911 | 15, KARNATAKA | TNDTA | 1 4. D. 12 | ر حرابوس |
| Since: 1000 Telepho | ne Number : | Johile No. 95 | 84515082 | -O Con - In- |
| 1,430 | 21348 E | mail add : ant | iappa, Kyata | navar@cog N2 |
| Name of Company and Company addr | ess of Applicant / If student, plea | ase provide nami | e and address of a | pplicant's school: |
| Cognizant Technology | | | | |
| Park F3 and 43 Bu | aldings Outer Ring | Road Ne | ar Nagatua | ra Rongalus |
| Since: 2022 Contact | Number: 1538021348 Did : annappa. Kyatanawa tick which is applicable): | Designation / Pos | ition in the comp | any: |
| Email ad | id: annappa Kyatanau | Program | mer Ana | list |
| Purpose of Visit to the Philippines (pls | tick which is applicable): | Cogni Zan | to Com | J = |
| [] Tourism | Attending business conferences, | , meetings, or sit | e visits | |
| () Education { | Participating in competitions, p. | ageants or other | activities with a p | orize |
| |] Seaman | | | |
| Visiting relatives |] Missionary work | | | |
| () Others please specify: | * | | | |
| Date of Arrival in the Flip | ht Number / Arrivel in the | T OLUM | . Dom - 15-1 | |
| Philinnines . Phil | ht Number (Arrival in the lippines) | | e Port of Entry | |
| 30/AUGUST/2024 | whhuesi | I M | ANILA | |
| Name and relationship of reference in | Philiopines (please include telen | hone and email | address). | |
| ESTRELLITA LEON | JOR CALLITO B | usiness 1 | Accor into | |
| | | | | a + e |
| M: +63 917550931 | | | | vizant + com |
| Address in the Philippines (if staying in | n multiple locations, please list all | l accommodation | n addresses) : | |
| | | | | |
| Contact dataile (telashassassassassassassassassassassassassa | Ideas of a sale for | | | |
| Contact details (telephone or email ad | ioress of establishment): | | | |
| Note : For student, employment (under | er FSC49-06) or SPRV vice applies | inte acuali acat | ass sook in a feet | 05.05.05. |
| 47A2 visas, you need not fill up the fie | lds below and may proceed to be | nics, as well as th | iose applying for S | C, 9E, 9G, 9F and |
| Date of Departure from the Philippine | | | Ouration Stay : | |
| | | 1 | | |
| NIA | I N/A | | N/A | |

| flow are you related to the person inviting you to the Philippines? What visa does he/she possess? (please | |
|--|-------|
| attach the invitation letter with a copy of the inviting parties' visa as affixed on his passport) ESTRELLITA LEONOR GALLITO; Business Associate; Nationality: Phili | ppine |
| Will you be extending your stay in the Philippines and be converting to a 9(g), 9(f), 47(a-2), SRRV or SWP? Yes / No. If yes, please explain: T will be converting 47(a-2) | |
| Have you been charged of any crime by any court? Yes / No V | |
| If yes, please explain: | |
| Have you been issued a Philippine visa before? Yes (Visa Number) / No V Did you extend your stay in the Philippines? If yes, please provide the reasons: | |
| Do you currently have or have you had in the last 5 years any communicable disease? Yes / No VII yes, please provide details : | |
| Do you have a history of mental illness? Yes / No 🗸 If yes please provide details: | |
| Were you ever denied any kind of Philippine visa, denied admission into or deported from the Philippines and removed at government expense from the Philippines and other countries? Yes / No 🗸 | |
| A. For those applying for a Philippine visa through an authorized representative: I hereby authorize the following person / company to apply for my visa on my behalf. I shall assume all responsibilities for the answers provided by my authorized representative as if they were my own responses. Name and signature of Authorized Representative: Contact details: | |
| B. Undertaking: By submitting this application form and all the corresponding documents which wholly becomes part of my application kit, I, | |
| - agree that any false or misleading statement and submission of fraudulent documents will result in the refusal of a visa and possible blacklisting; | |
| - agree to submit any additional documents that may be required within five (5) working days and failure to do so will result in the denial of my application; | |
| - agree that submission of my visa application is not a guarantee that a visa will be issued; | |
| - agree that the visa fee will not be refunded regardless of the outcome of my visa application or the outcome of the travel; | |
| - agree that the possession of the visa does not guarantee my admissibility into the Philippines | |
| - agree that I have read and understood all the questions in this application form and the answers I have furnished on this form are true ad correct to the best of my knowledge and belief; | |
| - agree to assume full responsibility of all the answers, facts and documents provided by my legal / authorized representative whose signature appears in box A | |
| Beech, 19/07/2024 | |
| Signature of Applicant and date | |