

UNITED ARAB EMIRATES

INTRODUCTORY STATEMENT



Statement No

* Full Name	<input type="text" value="Anziya Vadakkencherry Kareem"/>		
Family Name	<input type="text"/>	Alias	<input type="text"/>
* Place of Birth	<input type="text" value="India"/>	* Date of Birth	<input type="text" value="17/12/1995"/>
Previous Nationality	<input type="text"/>	* Present Nationality	<input type="text" value="Indian"/>
* Religion	<input type="text" value="Muslim"/>	* Sect	<input type="text" value="Islam"/>
Date of Entry to U.A.E	<input type="text" value="07/07/2023"/>	Port of Entry	<input type="text" value="Dubai"/>
Sponsor Upon Entry	<input type="text"/>		

PRESENT SPONSOR * Facility Name / you want to join.....

<input type="text" value="Husband Visa"/>			
Place of Employment	<input type="text"/>	Profession	<input type="text"/>
Office Tel No	<input type="text"/>	Bank	<input type="text"/>
		Salary	<input type="text"/>

PASSPORT AND RESIDENCE DETAILS

Emirates ID No.:.....

* Passport/Document No	<input type="text" value="T6898684....."/>	* Place of Issue	<input type="text" value="Cochin, Kerala....."/>
* Date of Issue	<input type="text" value="30/07/2019....."/>	* Date of Expiry	<input type="text" value="29/07/2029....."/>
Residence V. No	<input type="text" value="....."/>	Place of Issue	<input type="text"/>
Date of Issue	<input type="text"/>	Date of Expiry	<input type="text"/>

QUALIFICATION * Profession.....

<input type="text" value="Bachelor of Dental Surgery"/>	School/ University	<input type="text" value="Kerala University of Health Science"/>	
Date of Graduation	<input type="text" value="15/04/2021"/>	Country	<input type="text" value="India"/>
Languages	<input type="text" value="English"/>		

* MARITAL STATUS

Name of Spouse	<input type="text" value="Firoz Sabath"/>	Nationality	<input type="text" value="Indian"/>
Place of Birth	<input type="text" value="India....."/>	Date of Birth	<input type="text" value="04/09/1990"/>
Employer	<input type="text" value="Canadian University Dubai"/>	Profession	<input type="text" value="Web Developer"/>

CHILDREN

1	Ayaan Mohammaed	2		3	
4		5		6	
7		8		9	

Father's Name Nationality

Place of Birth Date of Birth

Employer Profession

* Mother's Name Nationality

Place of Birth Date of Birth

Employer Profession

RELATIVES

	<u>Name</u>	<u>Nationality</u>	<u>Employer</u>
1			
2			
3			

FRIENDS

	<u>Name</u>	<u>Nationality</u>	<u>Employer</u>
1			
2			
3			

RESIDENCE DETAILS

* Emirate:.....

* Zone Street

Proprietor House/Building No

Floor No Flat No

Res. Tel. No * Mobile Tel. No

Pager P.O. Box

PREVIOUS EMPLOYMENT IN U.A.E

1		2	
3		4	

COUNTRIES YOU VISITED

1	<input type="text" value="Nil"/>	2	<input type="text"/>	3	<input type="text"/>
4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>

COUNTRIES OF PREVIOUS EMPLOYMENT

1	<input type="text" value="India"/>	2	<input type="text"/>	3	<input type="text"/>
4	<input type="text"/>	5	<input type="text"/>	6	<input type="text"/>

VEHICLE DETAILS

Type	<input type="text"/>	Place of Registration	<input type="text"/>
Plate No	<input type="text"/>	Colour of Plate	<input type="text"/>
D. License No	<input type="text"/>	Place of Issue	<input type="text"/>
Date of Issue	<input type="text"/>	Date of Expiry	<input type="text"/>

HAD YOU EVER BEEN IN THE MILITARY SERVICE ?I **YES** ☐ **NO** ☒

a- Country	<input type="text"/>	b- Type of Service	<input type="text"/>
c- Rank	<input type="text"/>	d- Duration	<input type="text"/>

I the undersigned undertake that details contained in this statement are correct and complete

Enclosure: Four Personal photos, One photo copy of passport

Date of Employment

Name	<input type="text" value="Anziya V.K"/>
Signature	<input type="text"/>
Date	<input type="text" value="19/01/2024"/>