

File Number (For Office Use Only)

GOVERNMENT OF INDIA, MINISTRY OF EXTERNAL AFFAIRS

PASSPORT APPLICATION FORM

Please read the Passport Instruction Booklet carefully before filling the form. Fill this form in CAPITAL LETTERS using blue/black ink ball point pen only. Furnishing of incorrect information/ suppression of information would lead to rejection of the application and would attract penal provisions as prescribed under the Passports Act, 1967. Please produce your original documents at the time of submission of the form.

Service Required

Application Reference Number 23-0007691102

FRESH Applying For Type of Application NORMAL

Applicant Details

Type of Passport Booklet

KHUSHI AGRAWAL Applicant's Name

NORMAL

27/06/2001 Date of Birth (DD/MM/YYYY)

Validity Required NA

Place of Birth (Village/Town/City) **KANAD**

AGAR MALWA District

State/UT MADHYA PRADESH

INDIA Region/Country

FFMAI F Gender

Marital Status SINGLE

Citizenship of India by **BIRTH**

PAN EWAPA7965L

STUDENT Employment Type

Is either of your parent (in case of

minor)/spouse, a government servant?

Educational Qualification 10TH PASS AND ABOVE

Are you eligible for Non-ECR category?

Aadhaar Number 482658678671

Family Details

Father's Name RAJENDRA AGRAWAL

Mother's Name SAVITA AGRAWAL

Present Residential Address Details

WARD NO. 15 MATAJI ROAD KANAD, KANAD, AGAR MALWA, Address

MADHYA PRADESH

PIN 465230

Police Station **KANAD**

Please paste your unsigned recent color photograph of size 4.5cm * 3.5cm.

Signature/Left Hand Thumb Impression of Illiterate Applicant and Minors who

cannot sign.

5/8/23, 11:17 PM View/Print Submitted Form

Mobile/Tel No. 9009178229

E-mail AGRAWALKHUSHI95@GMAIL.COM

Permanent Residential Address

Address WARD NO. 15 MATAJI ROAD KANAD, KANAD, AGAR MALWA,

MADHYA PRADESH

PIN 465230

Police Station KANAD

Mobile/Tel No. 9009178229

Emergency Contact Details

Name and Address KHUSHI AGRAWAL, INDORE

Mobile/Tel No. 9009178229

E-mail AGRAWALKHUSHI95@GMAIL.COM

Other Details

Payment Details

Mode of Payment UPI

Date 28/04/2023

Receipt/Reference No. CPACRWWCG5

Amount Received (Rs.) 1500.00 (ONE THOUSAND FIVE HUNDRED ONLY)

Enclosures

1.Aadhaar Card/E-Aadhaar

2. Aadhaar Card (Address Proof)

Self Declaration

I owe allegiance to the sovereignty, unity & integrity of India, and have not voluntarily acquired citizenship or travel document of any other country. I have not lost, surrendered or been deprived of the citizenship of India. I have not contravened any of the conditions relating to the possession and use of an Indian passport.

I affirm that the information and particulars given by me in this form are true and correct. I further state that I am not suppressing any material information in this regard. I further affirm that the enclosures and documentary proof submitted in support of my application for an Indian passport are authentic and solely pertain to me and I am fully responsible for the accuracy of the same. I am liable to be penalized or prosecuted if found otherwise. I am aware that under the Passports Act, 1967 it is a criminal offence to furnish any false information or to suppress any material information with a view to obtaining passport or travel document.

I have read and understood the contents of the above and by submitting this form certify that all the information submitted by me in the form is bonafide.

Place KANAD Signature/Left Hand Thumb Impression of

Applicant (If applicant is minor, either parent

Date 28/04/2023 to sign)