



EMBASSY OF INDIA LIMA PERU

AV. SALAVERRY 3006, SAN ISIDRO

LIMA 27

http://indembassy.org.pe/ 005112616006 Paste your unsigned recent color photograph.
Size: 2" X 2"



Visa Application Form

Signature

PERLV0005219							
A. Personal	Particulars (A	s in Passport)					
Surname (As in Passport)		AMARO ROBLADILLO	AMARO ROBLADILLO				
Given Name (As in Passport)		HANS JEFREYN	HANS JEFREYN				
Previous/oth	er Name if any						
Sex		MALE	Marital	Status	SINGLE		
Date of birth 25-NOV-1997		25-NOV-1997	Religion		CHRISTIAN		
Place of Birth Town/City		JUNIN-YAULI-SANTA ROSA DE SACCO	Country of Birth		PERU		
Citizenship /	National ID No	70747193	Educational Qualification		HIGHER SECONDARY		
Visible ident	ification marks	NONE					
Current Nati	onality	PERU	Nationality by Birth/ Naturalization BY BIRTH		on BY BIRTH		
Any Other P	revious/Past Na	itionality					
B. Passport	Details						
Passport No.		116517804	Date of issue (dd/mm/yyyy)		07-JUN-2017		
Place of issue		PERU	Date of expiry (dd/mm/yyyy)		07-JUN-2022		
Any other P	assport/Identi	y Certificate held (if yes ,plea	se fill in	the following) NO			
Country of issue			Place of issue				
Passport/IC No			Date of issue(dd/mm/yyyy)				
Nationality/s	tatus				<u>'</u>		
C. Applican	t's Contact De	tails					
	AV LOS RUIS	SENORES 465 C-601		Phone No			
Present address	SANTA ANITA			Mobile /Cell No	51966261864		
auuress	LIMA-LIMA, PERU LIMA 43			Email address	HAMAROR@UNI.PE		
Permanent Address	AV. LOS RUISENORES 465 C-601 SANTA ANITA LIMA-LIMA						
D. Family D	etails						

Relation	Name	Nationality	Prev. Nationality	Place/Country of Birth
Father's	CESAR JOSE AMARO GOMEZ	PERU	PERU	JUNIN PERU
Mother's	MARY MARGOHT LUZ ROBLADILLO CHIRINOS	PERU	PERU	JUNIN PERU
Spouse				

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

(Visa snail be valid from the Date of Issue and not from the Date of Journey)			
Type Of Visa Required ENTRY VISA		No of Entries	SINGLE
Period of Visa (Month)	2 Month	Expected Date of Journey	22-FEB-2019
Port Of Arrival	MUMBAI	Port of Exit	

$\overline{}$	•
\sim	ı
2	
-	
0	
0	ı
5	
_	ı
$\overline{\sim}$	
щ.	
ш	
ġ.	
\overline{c}	
_	
$\overline{}$	•
ō	
∵∺	
Œ	
ၓ	
=	•
2	
9	

0

Required Detail of ENTRY VISA					
Durnage of Visit	. EOD DI ID	POSE NOT COVERED BY ANY	OTHED VICA CATECODY		
Purpose of Visit F. Previous Visit		FOSE NOT COVERED BY ANT	OTTER VISA CATEGORT		
Have You Ever		? NO			
Address where You stayed in India					
Citios i	in India Visite	, ad			
Oilles i	Type of Vi		Visa Number		
Visa	a Issued Pla		Date of Issue		
Countries visited ARGENTINA				1	
Have you been r	efused an Ir	dian Visa or extension of the	same previously or deported from Ir	ndia ?	
If yes above model No/Date	ention when	and by whom with control			
G. Profession/C	Occupation	Details of Father			
	Occupation		Designation/Rank		SUPERVISOR DE CONCENTRADOS
		CIA DE MINAS BUENAVENTURA			
Employer Address Phone Number +51 994527406 AV LAS BEGONIAS 215 SAN ISIDRO					
Past occup	pation if any	ENGINEER			
Are/have you wo	orked with Ar	med forces/ Police/ Para Milit	ary forces? NO		
Organization			Designation		
Place of Posting			Rank		
H. Address of P					
Place/Hotel Nam	ne Addre	ess of Place / Hotel		State	Phone No.
I. Details of Two Reference					
	In India		In PERU		
	TATA CONSULTA	ANCY SERVICES LIMITED	ANA UGAZ		
Address		S, 18, SHESHADRI ROAD IR, BENGALURU, KARNATAKA	AV. NICOLAS AYLLON NRO. 2941 (3ER PISO)		
Phone Number	+91 80672 460	00	6108222 - 8285		
. DECLARATION	\ :				

- 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.

04 1441 0040	
Date: 24-JAN-2019	Applicant's signature (as in Passport)
Date	Applicant 5 Signature (as in Fassport)