Under Section 3 of THE AADHAAR (TARGETED DELIVERY OF FINANCIAL AND OTHER SUBSIDIES, BENEFITS AND SERVICES) ACT, 2016 (Aadhaar Act)

**AADHAAR ENROLMENT/ CORRECTION/ UPDATE FORM**

***Aadhaar Enrolment and Mandatory Biometric Update is free. No charges are applicable for Form. In case of Correction/ Update, provide your Aadhaar Number (UID), Full Name and only that field which needs Correction/ Update.***

 Resident  Non-Resident Indian (NRI\*) ***Please follow the instructions overleaf while filling up the form. Use capital letters only.***

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | Pre Enrolment ID (If applicable): | | **2** | In case of Update provide Aadhaar Number (UID): | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2.1** | Biometric Update (Photo + Fingerprint + Iris) Mobile Date of Birth Address Name Gender Email | | | | | | | | | | | | | | | | | | |
| **3** | Full Name: | | | | | | | | | | | | | | | | | | |
| **4** | Gender: Male Female Transgender | | **5** | Age: Yrs OR Date of Birth: | DD | MM | YYYY |  Declared Verified | | | | | | | | | | | | | | | |
| **6** | Address: C/o NAME | | | | | | | | | | | | | | | | | | |
| House No./ Bldg./ Apt: | | Street/ Road/ Lane: | | | | | | | | | | | | | | | | |
| Landmark: | | Area/ Locality/ Sector: | | | | | | | | | | | | | | | | |
| Village/ Town/ City: | | Post Office: | | | | | | | | | | | | | | | | |
| District: | Sub-District: | | | | | | | | | State: | | | | | | | | |
| E-Mail: | Mobile No.: | | | | | | | | | | | | | | | | | | | | PIN Code: | | | | | | | | | | | | | | | |
| **7** | Details of: Father Mother Guardian Husband Wife  *For children below 5 years Father/Mother/Guardian’s details are mandatory. Adults can opt not to specify this information.* | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | | | | | | | | |
| EID/ Aadhaar No.: | | | | | | | | | | | | | | | dd | mm | yyyy | hh : mm : ss| | | | | | | | | | | | | | | | | | | |
| Verification Type: Document Based Introducer Based Head of Family (HoF) Based  Select only one of the above. Select Introducer or Head of Family only if you do not possess any documentary proof of identity and/ or address. Introducer and Head of Family details are not required in case of Document based verification. | | | | | | | | | | | | | | | | | | | |
| **8** | **For Document Based** *(Write Names of the documents produced. Refer overleaf of this form for list of valid documents)* | | | | | | | | | | | | | | | | | | |
| a. POI | | | b. POA | | | | | | | | | | | | | | | | |
| c. DOB  *(Mandatory in case of Verified Date of Birth)* | | | d. POR  *(Mandatory in case of HoF based Enrolment/ Update)* | | | | | | | | | | | | | | | | |
| **9** | **For Introducer Based –** Introducer’s  Aadhaar No.: | | | | | | | | | | | | | | **For HoF Based -** Details of : Father Mother Guardian Husband Wife  HoF’s EID/ Aadhaar No.: | | | | | | | | | | | | | | |  dd | mm | yyyy | hh : mm : ss| | | | | | | | | | | | | | | | | | |
| I hereby confirm the identity and address of as being true, correct and accurate.  Introducer/ HoF’s Name: **Signature of Introducer/ HoF** | | | | | | | | | | | | | | | | | | | |

Disclosure under section 3(2) of THE AADHAAR (TARGETED DELIVERY OF FINANCIAL AND OTHER SUBSIDIES, BENEFITS AND SERVICES) ACT, 2016

I confirm that I have been residing in India for at least 182 days in the preceding 12 months / I am Non Resident Indian (NRI) & information (including biometrics) provided by me to the UIDAI is my own and is true, correct and accurate. I am aware that my information including biometrics will be used for generation of Aadhaar and authentication. I understand that my identity information (except core biometric) may be provided to an agency only with my consent during authentication or as per the provisions of the Aadhaar Act. I have a right to access my identity information (except core biometrics) following the procedure laid down by UIDAI.

Verifier’s Stamp and Signature:

(Verifier must put his/ her Name, if stamp is not available) Applicant’s signature/ Thumbprint

To be filled by the Enrolment Agency only: Date & time of Enrolment:

***Note: In case of minor, the signature will be done by parent/guardian. In case of incapacitated person, the signature will be done by Legal Guardian of Incapacitated Person***

***\* In case of NRI, only Indian Passport will be valid as POI.***