

**PASSPORT SERVICE FORM**

FREE OF CHARGE

[ Please write **clearly** in **Capital Letters** in **Blue / Black ink** only ]



**EMBASSY OF INDIA  
BAHRAIN**

P.O. BOX 26106, ADLIYA  
TEL : 00973 17712683  
FAX : 00973 17710329

WEBSITE: [www.indianembassybahrain.com](http://www.indianembassybahrain.com)

PLEASE TICK ( ✓ ) THE APPROPRIATE BOX(ES)	
<input type="checkbox"/>	NEW PASSPORT
<input type="checkbox"/>	EXTN. OF VALIDITY OF SHORT-TERM PASSPORT
<input type="checkbox"/>	NEW PASSPORT FOR LOST / DAMAGED PASSPORT
<input type="checkbox"/>	PASSPORT FOR MINOR BORN IN BAHRAIN
<input type="checkbox"/>	CHANGE OF NAME / SURNAME
<input type="checkbox"/>	CHANGE IN APPEARANCE
<input type="checkbox"/>	EMERGENCY CERTIFICATE
<input type="checkbox"/>	MISCELLANEOUS SERVICE (See col.22)

**PASTE A RECENT \*  
PASSPORT SIZE  
PHOTO HERE  
&  
Put signature / thumb  
impression **within**  
space given below**

**1. FULL NAME (NO INITIALS)**

\_\_\_\_\_

( NAME ) [Not more than 34 characters] \_\_\_\_\_ ( SURNAME )

**2. FULL PREVIOUS NAME, IF ANY [GIVE DOCUMENTARY PROOF OF CHANGE OF NAME AFTER MARRIAGE OR OTHER WISE]**

\_\_\_\_\_

<b>3. SEX ( M / F )</b>	<b>4. DATE OF BIRTH</b>	<b>5. PLACE OF BIRTH</b>
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<b>6. FULL NAME OF FATHER</b>	<b>NATIONALITY</b>
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<b>7. FULL NAME OF MOTHER</b>	<b>NATIONALITY</b>
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<b>8. FULL NAME OF WIFE / HUSBAND, IF ANY</b>	<b>NATIONALITY</b>
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<b>9. VISIBLE DISTINGUISHING MARKS, IF ANY</b>	<b>HEIGHT</b>	<b>M</b>	<b>Cms</b>
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<b>10. EDUCATIONAL QUALIFICATION(S)</b>	<b>11. PROFESSION / OCCUPATION</b>
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**12. INDICATE CURRENT 'EMIGRATION CHECK' STATUS IN THE PASSPORT (PLEASE TICK ( ✓ ) ONE)**  
 EMIGRATION CHECK REQUIRED (ECR)  EMIGRATION CHECK NOT REQUIRED (ECNR)

<b>13. TOTAL PERIOD OF RESIDENCE ABROAD</b>	<b>YEARS</b>	<b>MONTHS</b>
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<b>14. PASSPORT NO.</b>	<b>DATE OF ISSUE</b>
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<b>PLACE OF ISSUE</b>	<b>DATE OF EXPIRY</b>
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<b>15. FULL PERMANENT ADDRESS IN INDIA</b>	<b>FOR OFFICE USE ONLY</b>	
		<b>INITIALS WITH DATE</b>
	<b>ENTERED</b>	
	<b>SCANNED</b>	
	<b>CHECKED</b>	

<b>16. FULL CURRENT RESIDENTIAL ADDRESS IN BAHRAIN</b>  POST BOX NO.: TEL. NO. _____ MOB. NO. _____	<b>CLEARED</b>	
	<b>GRANTED</b>	

**17. FULL NAME AND ADDRESS OF PERSON TO BE INTIMATED IN THE EVENT OF ANY EMERGENCY**

\_\_\_\_\_

TEL. NO. \_\_\_\_\_ MOB. NO. \_\_\_\_\_

18. CITIZEN OF INDIA BY  BIRTH  DESCENT  REGISTRATION  NATURALISATION

19. IF APPLYING FOR DUPLICATE PASSPORT, WAS THE CURRENT PASSPORT LOST OR DAMAGED

20. PLEASE GIVE DETAILS OF PREVIOUS NATIONALITY OR TRAVEL DOCUMENT OF A FOREIGN COUNTRY, IF ANY

PREVIOUS TRAVEL DOCUMENT NO :

DATE OF ISSUE :

PLACE OF ISSUE :

21. TICK 'YES' OR 'NO' IN RESPECT OF THE FOLLOWING QUESTIONS :-

- A) WHETHER YOU WERE EVER REFUSED / DENIED A PASSPORT ?  YES  NO
- B) WHETHER YOUR PASSPORT WAS IMPOUNDED OR REVOKED ?  YES  NO
- C) WHETHER YOU WERE EVER CONVICTED FOR ANY CRIMINAL OFFENCE & SENTENCED TO IMPRISONMENT IN INDIA FOR TWO YEARS OR MORE ?  YES  NO
- D) WHETHER ANY CRIMINAL PROCEEDINGS ARE PENDING AGAINST YOU IN INDIA ?  YES  NO
- E) WHETHER YOU HAVE APPLIED FOR / GRANTED POLITICAL ASYLUM BY ANY FOREIGN GOVERNMENT ?  YES  NO

IF THE ANSWER TO ANY OF THE ABOVE IS 'YES' PLEASE FURNISH FULL DETAILS SEPARATELY AND ENCLOSE 'NO OBJECTION CERTIFICATE' FROM COMPETENT AUTHORITY OR COURT

22. FOR MISCELLANEOUS SERVICE PLEASE WRITE WHETHER IT IS FOR A) CHANGE OF ADDRESS  
B) ENDORSEMENT OF SPOUSE'S NAME C) DELETION OF NAME OF CHILD / SPOUSE D) PCC  
E) ANY OTHER (PLEASE SPECIFY)

#### DECLARATION

I OWE ALLEGIANCE TO THE SOVEREIGNTY & INTEGRITY OF INDIA AND HAVE NOT ACQUIRED CITIZENSHIP OR TRAVEL DOCUMENT OF ANY OTHER COUNTRY. I HAVE NOT LOST / SURRENDERED / BEEN DEPRIVED OF CITIZENSHIP OF INDIA.

THE INFORMATION GIVEN BY ME IN THIS FORM AND ENCLOSURES IS TRUE AND I AM SOLELY RESPONSIBLE FOR ITS ACCURACY. I AM AWARE THAT IT IS AN OFFENCE UNDER PASSPORT ACT, 1967 TO FURNISH ANY FALSE INFORMATION OR TO SUPPRESS ANY MATERIAL INFORMATION WITH A VIEW TO OBTAINING PASSPORT OR ANY OTHER TRAVEL DOCUMENT.

I FURTHER DECLARE THAT I HAVE NO OTHER PASSPORT / TRAVEL DOCUMENT.

PLACE : BAHRAIN

DATE :

(Signature or thumb impression of applicant)

#### Declaration by Parents / Legal Guardian in case of Minor

- Information given above in respect of \_\_\_\_\_, of whom I am the parent / legal guardian, is true.
- I undertake to be entirely responsible for his / her expenses.
- I solemnly declare that he / she has not lost, surrendered or been deprived of his / her citizenship of India.
- In case application is submitted on behalf of \_\_\_\_\_ for acquiring any other citizenship / travel documents, I undertake to inform the Embassy of India, Bahrain, immediately so that the travel document issued in favour of the minor may be withdrawn.

\_\_\_\_\_  
Signature of Father

\_\_\_\_\_  
Signature of Mother

\_\_\_\_\_  
Signature of Legal Guardian

ADDITIONAL INFORMATION (IF ANY)