



Reference Number: TEMP/261021/0007/01

State of Israel <u>Ministry of Interior</u> Embassy of Israel, New Delhi



מדינת ישראל <u>משרד הפנים</u> שגרירות ישראל בניו דלו

Application for entry visa to Israel

Instructions for completing application form:

1. Please attach a recent photograph 5.5 x 5.5 cm.

- 2. If application is not for the purpose of visit, spcify reason and supply documentation.
- 3. Please fill in following details in English:



Previous family name	Mother's name	Father's name	Given name	Family name
	NIRA RATNA	ANAND RATNA	SHIKHA	RATNA
		Den and an and a second se		

Previous nationality	Present nationality	Occupation	Date of birth	Place of birth
INDIA	INDIA	WORK AS STICHING	03/01/1995	LOWER KALAPAHAR , MANIPUR

Type Of Travel	Docs : National Passport			Family Status
valid untill	Issued on	issued at	number	Married Single
01/17/2031	01/18/2021	GUWAHATI	U3028803	Widow Divorced
If you hold a La state whether y	issez-Passer issued by th ou have a return visa and	e State of your p indicate its valid		Purpose of entry into Israel
				WORK

	р	ermanent address ir	n India		
Telephone no.	Mobile no.	IEmail	Street and house no.	City	Country
8974208150	7629087077	shikharatna12@g mail.com	LOWER KALAPAHAR PO - KALAPAHAR , SENAPATI PIN ; 795122 , MANIPUR INDIA	MANIPUR	INDIA

Countries of transit	Requested duration of stay in Israel	Anticipated date	place of entry to Israel	Address in Israel

Category of residence permit (visitor, temporary resident, resident,immigrant, work)	Dates of previous stays in Israel
WORK	1.
	2.
	3.

https://del.israelvisa.in/online/rptOnlineVisaForm.aspx

particulars of dependants included in the application

Spouse (Note:Not applicable for single)

Date of birth	Place of birth	Father's name	Maiden na	me Given name	
Family name	Tra	avelling with	Pas	sport	
	1 avi	Children under the	e age of 18		
Travelling With	Passport	Date of birth	Place of birth	Given name	
					1
Travelling with	Passport	Date of birth	Place of birth	Given name	1
		Relation/reference	es in Israel		
Telephone No Email	Addres	s Re	lationship	Name	
		Details of The	Agency		
Agency Name	Mobile	Land	line No	Email	
AVIVA INTERNATIONAL	9892832227	2665	2035	avivainternationa 12006@gmail.com	
License No:	Type of Agency:		Agency Address:		ann an
	T .	l. I)

		SHOP NO. 3 NAVDEEP BUILDING, NEAR	141
Regd NO B- 0713/MUM/PER/1000	Recruitment Agency	MATHURDAS COLONY ST. ANTHONY STREET KALINA SANTACRUZ(E) MUMBAI-4000	*

Upload File/attachment

Id Proof :VoterId	
Download File -	
SHIKHA RATNA.jpg	· · · ·

Declaration

I declare that the particulars contained in this application are correct and have been made in awareness of the fact that they are to serve as basis for the consideration of my application. I also declare that I have not committed any criminal offence or any act directed against the Jewish people or the security of the state of Israel and that I am not affected with any illness which might endanger public health. There is no judicial warrant against me and I am not wanted by the police of any country. I hereby declare that I have not been issued with a restraining order. Furthermore, I have not been denied entry into Israel. I am aware that if a preventive order of this kind has been issued against me, I will be denied entry into Israel, and will be sent back to my country of origin. I am also aware that the receipt of a visa does not in any

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way invalidate the right of the Israel Ministry of the Interior to deny my entry into the territory of the State of Israel, if it becomes clear that the visa was issued on the basis of false information.

Applicant's Name :

SHIKHA RATNA Signature

Date: 10/26/2021 1:30:52 Place: NEW DELHI

Shêkha Ratha

