



Reference Number: TEMP/251121/0009/01

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



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

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:



Mother's name	Father's name	Given name	Family name
LATE BAL KUMARI CHHETRI	HASTA BAHADUR CHHETRI	SHIVANI	CHHETRI
	LATE BAL KUMARI	LATE BAL KUMARI HASTA BAHADUR	LATE BAL KUMARI HASTA BAHADUR SHIVANI

Previous nationality	Present nationality	Occupation	Date of birth	Place of birth
INDIA	INDIA	WORK AS A HOSTESS CAHIER	11/27/1994	TINGLING TEA ESTATE , WEST BENGAL

Type Of Travel [Docs : National Passp	oort		Family Status
valid untill	Issued on	issued at	number	Married Single
10/19/2026	10/20/2016	KOLKATA	P5107580	Widow Divorced
If you hold a Lai state whether yo	ssez-Passer issued bou have a return visa	by the State of your and indicate its vali	permanent residence dity	, Purpose of entry into Israel
				WORK

int of the	p	ermanent address i	n India		
Telephone no:	Mobile no.	Email	Street and house no.	City	Country
9002114671	9892832227	I Chivani chattei (TINGLING TE P.O-PALDHURA MIRIK DIST. DARJEELING PIN 734218, WEST BENGAL, INDIA	WEST BENGAL	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
	1.
WORK	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 name	Given name
Family name		Travelling with	Passport	
i anny name		0		

Children under the age of 18

			Place of birth	Given name	
Travelling With	Passport	Date of birth	Flace of birth		1
1673					-

Children above the age of 18

Travelling with	Passport	Date of birth	Place of birth	Given name
•				

Relation/references in Israel

		T	Deletionship	Name
T-I	Email	Address	Relationship	
Telephone No	Lillan			

Details of The Agency

N	Mobile	La	ndline No	Email	
Agency Name AVIVA INTERNATIONAL	9892832227		652035	avivainternationa 12006@gmail.com	.1
An An an and the state of the state of the later and the state of the	Type of Agency:		Agency Addr		
Regd NO B- 0713/MUM/PER/1000		*	MATHURDAS CO	NAVDEEP BUILDING,NEAR DLONY ST. ANTHONY STREET ACRUZ(E) MUMBAI-4000	

Upload File/attachment

Id Proof :VoterId	
Download File -	
SHIVANI CHHETRI.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 :

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SHIVANI CHHETRI Signature Shivani chhetri Date: 11/25/2021 3:48:35 Place: NEW PM DELHI

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