

VISA APPLICATION FORM

GIVEN NAME: AALIYAH			FAMILY NAME:			
			GIUPTA			
FATHER'S NAME: UISHAL MANGAL			MOTHER'S NAME: KAMINDER BIR KAUR			
DATE OF BIRTH: PLACE OF BIRTH:				CURRENT NATIONALITY:	OTHER NATIONALITY:	
20/01/2014	PATIACA, PUNJAB				OTTER RATIONALITY.	
GENDER:	MARITAL STATUS:			INDIAN	RELIGION:	
-						
CONTACT NUMBER: PERMANENT ADDRE			RESS: F	FLAT-24113, CLOVER HIGHLANDS		
		4th FLOOR, NIBM ROAD, PUNE-411048, INDIA				
EMAIL:		CURRENT ADDRES	SS:			
DECICNATION.	COMPANI	V NIA BAIE.	ADDRE	SS OF COMPANY/ EMPLOYER	o.	
DESIGNATION: COMPANY NAME: ADDRESS OF COMPANY/ EMPLOYER:						
TYPE OF TRAVEL DOCUMENT:						
ORDINARY PASSPORT DIPLOMATIC PASSPORT OFFICIAL PASSSPORT SERVICE PASSPORT						
PASSPORT NO.:		DATE OF ISSUE:		DATE OF EXPIRY:	PLACE OF ISSUE:	
T6257161	1	21/06/2019	7	20/06/2024	PUNE	
ADDRESS DURING YOUR STAY IN LEBANON: SERBA KASLIK JOUNIEH, 1200 LEBONAN						
NAME OF REFERENCE IN LEBANON: ADDRESS OF REFERENCE IN LEBANON:						
KAMINDER RIR KAUR						
RELATIONSHIP TO HOST IN LEBANON: MOTHER CONTACT NUMBER: +9613854344						
MAIN PURPOSE(S) OF VISIT:						
C☐TOURISM ☐ BUSINESS ☐ MEDICAL ☐ EDUCATION ☐ OFFICIAL ☐ FAMILY/ FRIENDS ☐ TRANSIT						
EXPLAIN I am going to med my mother with my father						
DATE OF ARRIVAL: DURATION OF STAY: ACCOMPANIED BY:						
25/12/2022 16 DAY'S VISHAL MANGAL (FATHER)						
NUMBER OF ENTRIES: SINGLE ENTRY DOUBLE ENTRY MULTIPLE ENTRY						
PREVIOUSLY VISITED LEBANON: NO YES - IF YES, WHEN (DD/MM/YYYY)						
ENTERING LEBANON: BY AIR BY LAND BY SEA						
*My signature engages my responsibility and subjects me to penalties specified by law in the event of giving a wrong declaration						
*I hereby agree not to undertake any work in Lebanon of any kind paid or unpaid. DATE: 26/11/2022 SIGNATURE:						
FOR OFFICIAL USE ONLY					FEES COLEECTED	
VISA NO.:/ DATE OF ISSUE:/					☐ 6600 RS ☐ 131250 L.L	
VISA TYPE: ☐ TOURIST ☐ BUSINESS ☐ DIPLOMATIC ☐ OFFICIAL				1	☐ 9400 RS ☐ 187500 L.L	
NUMBER OF ENTRIES: SINGLE DOUBLE MULTIPLE					☐ 13150 RS ☐ 262500 L.L	
					DECEMPT.	
DURATION OF STAY: 15 DAYS 1 MONTH 3 MONTHS 6 MONTHS RECEIPT:						

<u>IMPORTANT</u>: "IT IS MANDATORY TO PROVIDE ALL THE REQUIRED INFORMATIONS, LEAVING OUT ANY INFO WILL RISK REJECTING THE APPLICATION"