

Reference Number: TEMP/221021/0004/01

**State of Israel**  
**Ministry of Interior**  
**Embassy of Israel, New Delhi**



מדינת ישראל  
 משרד הפנים  
 שגרירות ישראל בניו דלהי

### 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, specify 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
	RENUKA SHARMA	PRAKASH SHARMA	DARSANA	SHARMA

Previous nationality	Present nationality	Occupation	Date of birth	Place of birth
INDIA	INDIA	WORKED AS A TEACHER	09/30/1995	LOWER GAIRIGAON , WEST BENGAL

Type Of Travel Docs : National Passport				Family Status	
valid until	Issued on	issued at	number	<input type="checkbox"/> Married <input checked="" type="checkbox"/> Single	
05/15/2027	05/16/2018	KOLKATA	S1695375	<input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	
If you hold a Laissez-Passer issued by the State of your permanent residence, state whether you have a return visa and indicate its validity				Purpose of entry into Israel	
				WORK	

permanent address in India					
Telephone no.	Mobile no.	Email	Street and house no.	City	Country
8710059924	9475435804	darshan95sharma@gmail.com	LOWER GAIRIGAON PATEN GODAK JALDHAKA DARJEELING PIN; 734503 , 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
WORK	1.

## 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
		<input type="checkbox"/>		

## Children under the age of 18

Travelling With	Passport	Date of birth	Place of birth	Given name	
<input type="checkbox"/>					1

## Children above the age of 18

Travelling with	Passport	Date of birth	Place of birth	Given name	
<input type="checkbox"/>					1

## Relation/references in Israel

Telephone No	Email	Address	Relationship	Name	

## Details of The Agency

Agency Name	Mobile	Landline No	Email	
AVIVA INTERNATIONAL	9892832227	26652035	avivainternational2006@gmail.com	1
License No:	Type of Agency:	Agency Address:		
Regd NO B-0713/MUM/PER/1000+75/7403/2008	Recruitment Agency	SHOP NO. 3 NAVDEEP BUILDING, NEAR MATHURDAS COLONY ST. ANTHONY STREET KALINA SANTACRUZ (E) MUMBAI-4000		

## Upload File/attachment

Id Proof :VoterId
Download File - DARSHANA SHARMA.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.

1:27 PM

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

I hereby 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 :

DARSANA SHARMA  
Signature

Date: 10/22/2021 1:26:29  
PM

Place: NEW  
DELHI

*Darsana Sharma*

Print



विद्यार्थी / OBSERVATION

विद्यार्थी सेवा / MISCELLANEOUS SERVICE

पिता / कानूनी अभिभावक का नाम / Name of Father / Legal Guardian

**PRAKASH SHARMA**



**S1695375**

माता का नाम / Name of Mother

**RENUKA SHARMA**

पति या पत्नी का नाम / Name of Spouse

पता / Address

**LOWER GAIRIGAON, PATEN-GODAK**

**JALDHAKA, DARJEELING**

**PIN: 734503, WEST BENGAL, INDIA**

पुराने पासपोर्ट का नं. और इसके जारी होने की तिथि एवं स्थान / Old Passport No. with Date and Place of Issue

फाइल नं. / File No.

**CA3061060653318**



