

50 ..... иоітауязево / Партя .... .... арра सेवा/ мізсецьмеоиз зеяvice गिता / कानूनी अभिभावक का नाम / Name of Father / Legal Guardian ONGDEN SHERPA माता का नाम / Name of Mother KANCHI SHERPA : पति या परनी का नाम / Name of Spouse . : -पता / Address MIDDLE KAKJHORA, SADAR • . DARJEELING, DARJEELING PIN: 734101, WEST BENGAL, INDIA पुराने पासपोर्ट का नं. और इसके जारी होने की सिथि एवं स्थान / Old Passport No. with Date and Place of Issue 11.1 फाईल नं./ File No. CA3069790539916 .....

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



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

#### 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
	LATE KANCHI SHERPA	LATE ONGDEN SHERPA	DOMA	SHERPA
/	SHERPA //	SHERPA	/i	

Previous nationality	Present nationality	Occupation	Date of birth	Place of birth
INDIAN	INDIAN	WORKED FOR EMIRATES FLIGHT	10/13/1992	KAKJHORA DARJEELING WEST BENGAL

Type Of Travel D	ocs : National Passp	ort		Family Status
valid untill	Issued on	issued at	number	Married Single
01/04/2027	01/05/2017	KOLKATA	P6763239	Widow Divorced
	ssez-Passer issued b ou have a return visa		permanent residence dity	e, Purpose of entry into Israel
				WORK

	permanent address in India					
Telephone no.	Mobile no.	IEmali	Street and house no.	City	Country	
7042308346	6295589258	sdoma788@gmail. com	MIDDLE KAKJHORA, SADAR DARJEELING, PIN CODE- 734101 WEST BENGAL, INDIA	WEST BENGAL	INDIA	

Countries of transit	Requested duration of stay in Israel		Address in Israel

	Dates of previous stays in Israel
WORK	1.
	2.

3.

#### particulars of dependants included in the application

#### Spouse (Note:Not applicable for single)

Date of birth	Place of birth		Father's name	Maide	n name	Given name
Family name	Т	Fravel	ling with		Passport	
	(					

# Children under the age of 18

Travelling With	Passport	Date of birth	Place of birth	Given name	
					1

Children above the age of 18

Travelling with	Passport	Date of birth	Place of birth	Given name	
					1

Relation/references in Israel

Telephone No Email Address Relationship Name Name

# Details of The Agency

Agency Name	Mobile	Lar	ndline No	Email
AVIVA INTERNATIONAL	9892832227	266	652035	avivainternationa 12006@gmail.com .1
License No:	Type of Agency:		Agency Address:	
Regd No B- 0713/MUM/PER/1000	Recruitment Agency +/5/7403/2008	*	SHOP NO 3 NAVDEEF MATHURDAS COLONY KALINA SANTACRUZ	ST ANTHONY STREET

# Upload File/attachment

Id Proof :VoterId	
Download File -	
<u>IMG_0781.jpg</u>	

# 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 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 : DOMA SHERPA Signature Date: 7/26/2021 12:02:29 Place: NEW DELHI

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