



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA



VISA APPLICATION FORM

GIVEN NAME: RANJAN		FAMILY NAME: KUMAR	
FATHER'S NAME: RAMESHWAR PASWAN		MOTHER'S NAME: KAMLAWATI PASWAN	
DATE OF BIRTH: 07/08/1993	PLACE OF BIRTH: DEORIA	CURRENT NATIONALITY: INDIAN	OTHER NATIONALITY: N/A
GENDER: <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	MARITAL STATUS: <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW		RELIGION: HINDU
CONTACT NUMBER: 9628962827	PERMANENT ADDRESS: BHUTAULI COLONY SOMNATH NAGAR DEORIA (U.P) 274001		
EMAIL: rfi.ranjan@gmail.com	CURRENT ADDRESS: - SAME AS ABOVE		
DESIGNATION: TAEKWONDO PARA ATHLETE	COMPANY NAME: SPORTS AUTHORITY OF INDIA	ADDRESS OF COMPANY/ EMPLOYER: SPORTS AUTHORITY OF INDIA SARAJINI NAGAR KANPUR ROAD, LUCKNOW U.P 226008	
TYPE OF TRAVEL DOCUMENT:			
<input checked="" type="checkbox"/> ORDINARY PASSPORT <input type="checkbox"/> DIPLOMATIC PASSPORT <input type="checkbox"/> OFFICIAL PASSPORT <input type="checkbox"/> SERVICE PASSPORT			
PASSPORT NO.: X5525202	DATE OF ISSUE: 13/6/2023	DATE OF EXPIRY: 12/6/2033	PLACE OF ISSUE: LUCKNOW
ADDRESS DURING YOUR STAY IN LEBANON: GRAND GABRIEL			
NAME OF REFERENCE IN LEBANON: LEBANESE TAEKWONDO FEDERATION		ADDRESS OF REFERENCE IN LEBANON: SIN EL FIL - QUBIC CENTER - 5TH FLOOR, SECTION 5,	
RELATIONSHIP TO HOST IN LEBANON: ATHLETE		CONTACT NUMBER: BEIRUT, LEBANON - +961-71464040	
MAIN PURPOSE(S) OF VISIT:			
<input checked="" type="checkbox"/> TOURISM <input type="checkbox"/> BUSINESS <input type="checkbox"/> MEDICAL <input type="checkbox"/> EDUCATION <input type="checkbox"/> OFFICIAL <input type="checkbox"/> FAMILY/ FRIENDS <input type="checkbox"/> TRANSIT			
EXPLAIN 8TH ASIAN PARA TAEKWONDO CHAMPIONSHIP 2023			
DATE OF ARRIVAL: 08-09-2023	DURATION OF STAY: 11-09-2023	ACCOMPANIED BY:	
NUMBER OF ENTRIES: <input checked="" type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input type="checkbox"/> MULTIPLE ENTRY			
PREVIOUSLY VISITED LEBANON: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES - IF YES, WHEN (DD/MM/YYYY)			
ENTERING LEBANON: <input checked="" type="checkbox"/> BY AIR <input type="checkbox"/> BY LAND <input type="checkbox"/> 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: **06/09/2023**

SIGNATURE: **[Signature]**

FOR OFFICIAL USE ONLY		FEES COLLECTED	
VISA NO.: _____ / _____ / _____	DATE OF ISSUE: _____ / _____ / _____	<input type="checkbox"/> 6600 RS	<input type="checkbox"/> 131250 L.L
VISA TYPE: <input type="checkbox"/> TOURIST <input type="checkbox"/> BUSINESS <input type="checkbox"/> DIPLOMATIC <input type="checkbox"/> OFFICIAL		<input type="checkbox"/> 9400 RS	<input type="checkbox"/> 187500 L.L
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE <input type="checkbox"/> DOUBLE <input type="checkbox"/> MULTIPLE		<input type="checkbox"/> 13150 RS	<input type="checkbox"/> 262500 L.L
DURATION OF STAY: <input type="checkbox"/> 15 DAYS <input type="checkbox"/> 1 MONTH <input type="checkbox"/> 3 MONTHS <input type="checkbox"/> 6 MONTHS		RECEIPT: _____	

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