



EMBASSY OF LEBANON
TO
THE REPUBLIC OF INDIA



VISA APPLICATION FORM

GIVEN NAME: SHIVANI		FAMILY NAME: AGGARWAL	
FATHER'S NAME: MR. CHANDI PRASAD BOSE		MOTHER'S NAME: MRS. SHANTI SUDHA BOSE	
DATE OF BIRTH: 19-11-1982	PLACE OF BIRTH: INDUPUR, ODISHA	CURRENT NATIONALITY: INDIAN	OTHER NATIONALITY: N/A
GENDER: <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE	MARITAL STATUS: <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOW		RELIGION: HINDU
CONTACT NUMBER: +91-9810423593	PERMANENT ADDRESS: HOUSE No. 2486, HOUSING BOARD COLONY, SECTOR 7A, FARIDABAD, HARYANA - 121006		
EMAIL: ilovetaekwondo@gmail.com	CURRENT ADDRESS: - SAME AS ABOVE -		
DESIGNATION: INTERNATIONAL TAEKWONDO REFEREE	COMPANY NAME: WORLD TAEKWONDO	ADDRESS OF COMPANY/ EMPLOYER/ FEDERATION: WORLD TAEKWONDO HEADQUARTERS, BAYOUNG TAEPYUNG BUILDING, 10TH FLOOR, SS SEJONG-DASO JANG-GU, SEOUL, KOREA	
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.: Z6720659	DATE OF ISSUE: 02-05-2022	DATE OF EXPIRY: 01-05-2032	PLACE OF ISSUE: DELHI, INDIA
ADDRESS DURING YOUR STAY IN LEBANON: PORTALUNA HOTEL & RESORT BY RESTON HOTEL, COASTAL HWY, JOUNIEH, LEBANON			
NAME OF REFERENCE IN LEBANON: LEBANESE TAEKWONDO FEDERATION	ADDRESS OF REFERENCE IN LEBANON: SIN EL FIL - QUBIC CENTER, 5TH FLOOR, SECTION J, BEIRUT, LEBANON		
RELATIONSHIP TO HOST IN LEBANON: INVITEE	CONTACT NUMBER: +961 71464 040		
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 2023 BEIRUT OPEN TAEKWONDO CHAMPIONSHIP			
DATE OF ARRIVAL: 09-09-2023	DURATION OF STAY: 4 DAYS	ACCOMPANIED BY: ALONG	
NUMBER OF ENTRIES: <input checked="" type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input type="checkbox"/> MULTIPLE ENTRY	PREVIOUSLY VISITED LEBANON: <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES - IF YES, WHEN (DD/MM/YYYY) 06-10-2022		
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: **30/08/2023**

SIGNATURE: **Shivani**

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"

For further informations please visit us on Embassy of Lebanon in New Delhi (@embassy.of.lebanon.in.india)

Embassy of Lebanon, India (@embassy_lebanon)

www.embassyoflebanon.in