

Reference Number: TEMP/081121/0016/01

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
	RITA CHHETRI	RAM KUMAR CHHETRI	SITA	CHHETRI

Previous nationality	Present nationality	Occupation	Date of birth	Place of birth
INDIAN	INDIAN	CLIENT COORDINATOR	07/01/1987	DARJEELING WEST BENGAL

Type Of Travel Docs : National Passport				Family Status
valid untill	Issued on	issued at	number	<input type="checkbox"/> Married <input checked="" type="checkbox"/> Single
01/08/2025	01/09/2025	KOLKATA	M5380961	<input type="checkbox"/> Widow <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
8101358961	8967993719	sita.chhetri17@gmail.com	LOWER LAPCHU, P.O – LAPCHU TEA ESTATE RANGLI RANGLIOT, DARJEELING, PIN-734213	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.

	2.
	3.

particulars of dependants included in the application
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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	
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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+7577403/2008	Recruitment Agency	SHOP NO 3 NAVDEEP BUILDING NEAR MATHURDAS COLONY ST ANTHONY STREET KALINA SANTACRUZ (E) MUMBAI 40009		

Upload File/attachment

Id Proof :VoterId
Download File - <a href="#">New Picture (6).png</a>

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 SITA CHHETRI

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Date: 11/8/2021 2:30:42 PM

Place: NEW DELHI



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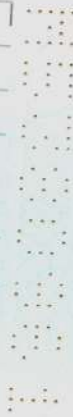
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निर्वाह / OBSERVATION

निर्वाह सेवा / MISCELLANEOUS SERVICE



पिता / कानूनी अभिभावक का नाम / Name of Father / Legal Guardian  
**RAM KUMAR CHHETRI**



M5380961

माता का नाम / Name of Mother  
**RITA CHHETRI**

पति या पत्नी का नाम / Name of Spouse

पता / Address  
**LOWER LAPCHU, P.O-LAPCHU TEA ESTATE**

**RANGLI RANGLIOT, DARJEELING**

**PIN: 734213, 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.  
**CA2068149480314**

