

Reference Number: TEMP/16921/0002/01

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
	DEVA SUSEELA	LAET DEVA RAJA RAMA MOHAN RAYAL	SUNEELA KUMARI	VADDI

Previous nationality	Present nationality	Occupation	Date of birth	Place of birth
INDIA	INDIA	WORKED AS A COOK	03/10/1976	RAVIPADU AP

Type Of Travel Docs : National Passport				Family Status
valid untill	Issued on	issued at	number	<input type="checkbox"/> Married <input type="checkbox"/> Single
11/15/2025	11/16/2015	KUWAIT	M9152149	<input checked="" 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
7995595311	9949425556	suneelavaddi26@gmail.com	1 64 POLLAPALLI PALAKOL WEST GODAVARI ANDHRA PRADESH PIN NO 534260	ANDHRA PRADESH	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

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	avivainternational12006@gmail.com	1
License No:	Type of Agency:	Agency Address:		
Regd NO B-0713/MUM/PER/1000	+91757740372008 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 -
SUNEELA KUMARI VADDI.png

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

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 :

SUNEELA KUMARI VADDI
Signature

Date: 9/16/2021 1:23:37 PM Place: NEW DELHI

V. Suneelakumari

Print

Blank lined area for text entry.

NOTIFICATION / OBSERVATION

विशेष सेवा / MISCELLANEOUS SERVICE

See Page # 33 For Spouse name

पिता / कानूनी अभिभावक का नाम / Name of Father / Legal Guardian
DEVA RAJA RAMA MOHAN RAYAL

माता का नाम / Name of Mother
DEVA SUSEELA

पति या पत्नी का नाम / Name of Spouse
VADDI DEVANANDAM

पता / Address
1 64

POLLAPALLI PALAKOL

WEST GODAVARI ANDHRA PRADESH

पुराने पासपोर्ट का नं. और इसके जारी होने की तिथि एवं स्थान / Old Passport No. with Date and Place of Issue
H3551439 23/03/2009 VISAKHAPATNAM

फाइल नं. / File No.
KWTJP2044915

OLD PPT REPORTED LOST