

+91 8604374900

SA APPLICATION FORM



GIVEN NAME: <u>VISHWATMA</u>		FAMILY NAME: <u>PASWAN</u>	
FATHER'S NAME: <u>JOKHU PASWAN</u>		MOTHER'S NAME: <u>SAVITRI</u>	
DATE OF BIRTH: <u>25/12/2006</u>	PLACE OF BIRTH: <u>GORAKHPUR UTTAR PRADESH</u>	CURRENT NATIONALITY: <u>INDIAN</u>	OTHER NATIONALITY: <u>N.A.</u>
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:
CONTACT NUMBER: <u>91 80 97 20 71 29</u>	PERMANENT ADDRESS: <u>NETAJI SUBHASH REGIONAL CENTER SPORTS AUTHORITY OF INDIA SARAJINI NAGAR, LUCKNOW PIN: 226008, UTTAR PRADESH INDIA</u>		
EMAIL: <u>INDIA TAERLWONDO 2020@gmail.com</u>	CURRENT ADDRESS: <u>N.A.</u>		
DESIGNATION: <u>ATHLETE</u>	COMPANY NAME: <u>INDIA TAERLWONDO</u>	ADDRESS OF COMPANY/ EMPLOYER: <u>403, TIMMY ARCADE NEAR MAROL NAKA, METRO STATION ANDHERI (EAST) - 400057</u>	
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.: <u>X5619779</u>	DATE OF ISSUE: <u>03/08/2023</u>	DATE OF EXPIRY: <u>02/08/2023</u>	PLACE OF ISSUE: <u>LUCKNOW</u>
ADDRESS DURING YOUR STAY IN LEBANON: <u>GEFINOR ROTAMA CLEMENCEAU STREET, BEIRUT CITY CENTER BEIROT, LEBANON, 113-5202</u>			
NAME OF REFERENCE IN LEBANON: <u>DANIELLA KELLO</u>	ADDRESS OF REFERENCE IN LEBANON: <u>SIN EL FIL - MUSIC CENTER, 5TH FLOOR SECTION J</u>		
RELATIONSHIP TO HOST IN LEBANON: <u>SPORTS PERSON</u>	CONTACT NUMBER: <u>+96171 464040</u>		
MAIN PURPOSE(S) OF VISIT: <input 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 <u>SPORTS</u>			
DATE OF ARRIVAL: <u>31/08/2023</u>	DURATION OF STAY: <u>11 DAYS</u>	ACCOMPANIED BY: <u>N.A.</u>	
NUMBER OF ENTRIES: <input type="checkbox"/> SINGLE ENTRY <input type="checkbox"/> DOUBLE ENTRY <input type="checkbox"/> MULTIPLE ENTRY			
PREVIOUSLY VISITED LEBANON: <input type="checkbox"/> NO <input type="checkbox"/> YES - IF YES, WHEN (DD/MM/YYYY) <u>N.A.</u>			
ENTERING LEBANON: <input 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: \_\_\_/\_\_\_/\_\_\_

SIGNATURE: विश्वतमा पासवान

<b>FOR OFFICIAL USE ONLY</b>		<b>FEES COLLECTED</b>	
VISA NO.: ___/___/___	DATE OF ISSUE: ___/___/___	<input type="checkbox"/> 6600 RS	<input type="checkbox"/> 131250 L.L
VISA TYPE: <input checked="" 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 checked="" 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 checked="" 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)

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