

GOVERNMENT OF INDIA
EMBASSY OF INDIA
STOCKHOLM

APPLICATION FORM FOR INDIAN PASSPORT

Application for :

Issue of a fresh ordinary passport	
Re-issue of an ordinary passport after expiry of final validity of the existing passport	

1. Applicant's Personal Particulars

Surname		
Given Name (in full)		
Other or Previous Name		
Maiden Name		
Date of Birth (e.g., 01 January 2009)		
Place of Birth	Country of Birth	
Height (e.g., 5 feet 10 inches)	Colour of Eyes	Colour of Hair
Visible Distinguishing Mark		

2. Applicant's Permanent Address in India

State	Pin Code
Telephone No.	

3. Applicant's Present Residential Address in Sweden/Latvia

Home/Street address	
Postal Code	Postal District
Telephone No.	Mobile No.
E-mail Address	
Local Car Driving License No.	
Place of Issue:	
Date of Issue:	

***4. Applicant's Address to be mentioned at the back-page of the Passport
(Choose one from the following)***

Permanent Address in India	Present Address in Sweden
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- : 2 : -

5. Applicant's Business Address

Title at Work

Name of the Organisation	
Street Address	
Postal Code	Postal District
Telephone No.	Fax No.
E-mail Address	

6. Personal Particulars of Applicant's Parents

Father's Full Name	
Country of Birth	Nationality at Birth
Mother's Full Name	
Country of Birth	Nationality at Birth

7. Applicant's Civil Status: Choose Whichever is Applicable

Unmarried	Married	Partner	Divorced	Widowed
Name and Nationality of Applicant's Spouse				
Name and Nationality of Applicant's Eldest Brother/Sister				
Name and Nationality of Applicant's Eldest Son/Daughter				

8. Applicant's Present Passport Particulars

Passport No.	Place of issue
Date of issue	Date of expiry

- : 3 : -

9. Applicant's Visa Status in Sweden (Tick mark one)

Permanent Residence	Work Permit
Student Visa	Temporary Visitor
Any Other (Please Explain)	

Applicant first left India on :	Applicant first visited Sweden on :
Applicant has been continuously staying outside India for :	Applicant's last visit to India :

10. Applicant is Citizen of India

By Birth	By Descent
By Naturalisation	By Registration

11. Contact Names and Addresses of Two Relatives/Friends in India

First Contact's Name	
State	Pin Code
Telephone No.	
E-mail Address	

Second Contact's Name	
State	Pin Code
Telephone No.	
E-mail Address	

12. Declarations by Applicant

Did you ever possess any other nationality or travel document of any other country, if so, please give details	Yes/No		
No.	Dated:	Issued at:	Validity:
Was your Passport ever impounded or revoked	Yes/No		
Were you ever refused an Indian Passport	Yes/No		
Are any criminal proceedings pending against you in India	Yes/No		
Have you ever been repatriated to India at the expense of the Government of India	Yes/No		

- : 4 : -

13. Payment of Fee (Please note that cheques/cards are not accepted at the Embassy Counter)

Date of Payment	Mode of Payment	Amount	Name of Bank

14. DECLARATION:

I SOLEMNLY AFFIRM THAT

i) I owe allegiance to the sovereignty and integrity of India, and

ii) Information given above in respect of myself, my son/daughter/ward is correct and nothing has been concealed and I am aware that it is an offence under the Passport Act 1967 to knowingly furnish false information or suppress material information, which attract penal and other punishments under the acts.

Place.....

Date.....

Signature.....

Signature of Applicant or Thumb Impression of His/Her Legal Guardian

(Left Thumb for male and right thumb for female).

Applicants must ALSO sign in the boxes given below. The signature will be affixed in your passport. Please sign strictly within these boxes with a black ballpoint pen. For a new-born child, parents/legal guardian is requested to put the thumb impression of the child in these boxes.

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