

Annex I



भारत का प्रधान कंसलावास  
शंघाई  
CONSULATE GENERAL OF INDIA  
SHANGHAI

**ADDITIONAL FORM TO BE COMPLETED BY ALL FOREIGN NATIONALS  
[NON CHINESE] ALONG WITH THE VISA APPLICATION FORM**

**PLEASE USE CAPITAL LETTER**

Tel: 00-86-21-62758882/885/886, Fax:00-86-21-62758881 Email: vcons@indianconsulate.org.cn

- (1) Name of applicant: Mr./Mrs./Ms .....
- (2) Father's/Husband's name: Mr. ....
- (3) Nationality: .....
- (4) Date & Place of Birth: .....
- (5) Passport Number: .....Date & Place of issue .....
- (6) Occupation & Name of Employer: .....
- .....
- (7) Permanent Address: (**Home Country Address**): .....
- .....
- (8) Nearest Indian Embassy/Consulate in the **Home Country** of applicant:  
.....
- (9) Address in China:  
.....
- (10) Purpose of visit to India & duration of stay: .....

**FOR OFFICIAL USE ONLY**

No.CGI/ SHA/407/2/99

Date:

2014

Forwarded to INDEMBASSY/HICOMIND/CONGENDIA\_\_\_\_\_ with the request to check the above particulars and communicate objection, if any, to the grant of visa to the applicant. If no reply is received within the stipulated period, visa will be issued.

Consul (Consular)