

## IDENTITY CERTIFICATE FORM Government of India, Ministry of External Affairs

Please read the instructions carefully before filling the form. Furnishing of incorrect information/ suppression of information would lead to rejection of application and would attract penal provisions as prescribed under the Passports Act, 1967. Please produce your original documents at the time of submission of the form. All fields marked with (\*) are mandatory to fill.

| Service Required                                               |                             |
|----------------------------------------------------------------|-----------------------------|
| Applying for*                                                  |                             |
| Applicant Details                                              |                             |
| Applicant's Given Name (Given Name means First Name followe    | d by middle Name (if any))* |
| -                                                              |                             |
| Surname                                                        |                             |
| Are you known by any other names(aliases)?*                    | Νο                          |
|                                                                |                             |
| Gender*                                                        | Date of Birth (DD/MM/YYYY)* |
| Place Of Birth                                                 |                             |
| Village or Town or City*                                       |                             |
| Country (If abroad)*                                           |                             |
|                                                                | District (If in India)*     |
| State (If in India)* Other Details                             |                             |
| Height of applicant (in cm)*                                   |                             |
|                                                                |                             |
| Colour of Eyes                                                 |                             |
| Colour of Hair                                                 |                             |
| Visible Distinguishing Mark                                    |                             |
| Marital Status*                                                |                             |
| Place/Country of Origin*                                       |                             |
| Registration Certificate(RC) Number*                           |                             |
| Aadhaar Number                                                 |                             |
| Employment Type*                                               | Educational Qualification*  |
| Family Details (Father/Mother/Legal Guardian details; at least | one is mandatory.) *        |
| Father's Given Name (Given Name means First Name followed b    | y Middle Name (If any))     |
|                                                                |                             |
| Surname                                                        |                             |
| Legal Guardian's Given Name (if applicable)                    |                             |
|                                                                |                             |
| Surname                                                        |                             |

Mother's Given Name (Given Name means First Name followed by Middle Name (If any))

| Surname                                                                         |                                                                                                                                                                                                                                                       |                                              |                                                               |                                                                         |                                                       |  |  |
|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------------------------|--|--|
|                                                                                 |                                                                                                                                                                                                                                                       |                                              |                                                               |                                                                         |                                                       |  |  |
| Period of Stay i                                                                | n India                                                                                                                                                                                                                                               |                                              |                                                               |                                                                         |                                                       |  |  |
| ⊖ Since Birth                                                                   | ◯ Others                                                                                                                                                                                                                                              |                                              |                                                               |                                                                         |                                                       |  |  |
| Present Reside                                                                  | ntial Address details (where applicant p                                                                                                                                                                                                              | presently                                    | resides)                                                      |                                                                         |                                                       |  |  |
| House No. and                                                                   | Street Name*                                                                                                                                                                                                                                          |                                              |                                                               |                                                                         |                                                       |  |  |
| Village or Town                                                                 | or City*                                                                                                                                                                                                                                              |                                              |                                                               |                                                                         |                                                       |  |  |
| State*                                                                          |                                                                                                                                                                                                                                                       |                                              | District*                                                     |                                                                         |                                                       |  |  |
| Police Station*                                                                 |                                                                                                                                                                                                                                                       |                                              | _<br>PIN*                                                     |                                                                         |                                                       |  |  |
| Mobile Number*                                                                  |                                                                                                                                                                                                                                                       |                                              |                                                               |                                                                         | Telephone Number                                      |  |  |
| E-mail ID                                                                       |                                                                                                                                                                                                                                                       |                                              | ]                                                             |                                                                         |                                                       |  |  |
| ls permanent a                                                                  | iddress same as present address?* $\bigcirc$                                                                                                                                                                                                          | Yes 🔿                                        | No                                                            |                                                                         |                                                       |  |  |
| Permanent Ado                                                                   | dress Abroad                                                                                                                                                                                                                                          |                                              |                                                               |                                                                         |                                                       |  |  |
| Countries for w                                                                 | hich Identity Certificate is required                                                                                                                                                                                                                 |                                              |                                                               |                                                                         |                                                       |  |  |
| Country 1*                                                                      |                                                                                                                                                                                                                                                       | Purpose of Visit*                            |                                                               |                                                                         |                                                       |  |  |
| Emergency Cor                                                                   | ntact Details*                                                                                                                                                                                                                                        |                                              |                                                               |                                                                         |                                                       |  |  |
| Name and Addr                                                                   | ess*                                                                                                                                                                                                                                                  |                                              |                                                               |                                                                         |                                                       |  |  |
|                                                                                 |                                                                                                                                                                                                                                                       |                                              |                                                               |                                                                         |                                                       |  |  |
| Mobile Number                                                                   |                                                                                                                                                                                                                                                       | Telep                                        | Telephone Number                                              |                                                                         |                                                       |  |  |
| E-mail ID                                                                       |                                                                                                                                                                                                                                                       |                                              |                                                               |                                                                         |                                                       |  |  |
| Previous Identit                                                                | ty Certificate/ Application Details                                                                                                                                                                                                                   |                                              |                                                               |                                                                         |                                                       |  |  |
| Have you ever a                                                                 | applied for Identity certificate, but not is                                                                                                                                                                                                          | ssued?*                                      | 🔿 Yes                                                         | 🔿 No                                                                    |                                                       |  |  |
| other country. I h<br>this form and th<br>otherwise. I am a<br>information with | n<br>to the sovereignty , unity & integrity of Indi<br>ave not lost, surrendered or been deprived o<br>e enclosures is true and I solely responsibl<br>ware that under the Passport Act, 1967 it is a<br>a view to obtaining passport or travel docum | of the the ci<br>e for its ac<br>criminal of | tizenship of India<br>curacy, and I am<br>ffence to furnish a | and I affirm that the<br>n liable to be penali<br>any false information | information given by me in zed or prosecuted if found |  |  |
| Place*                                                                          |                                                                                                                                                                                                                                                       |                                              | Dat                                                           | te (DD/MM/YYYY)*                                                        |                                                       |  |  |

Place\*