APPLICATION FOR ISSUE OF EMERGENCY CERTIFICATE TO DETAINEES IN DEPORTATION CENTER JAIL

(Form will not be accepted without identification)

Consulate General of India, Jeddah

Fax Number: **00966-2-6520076**

en Name :	on —— L letters.	Paste one photograph he		
OTE: Please fill the form in CAPITA rname (in block letters): en Name as : cionality:	L letters.			
en Name :				
te of Birth (DD/MM/YYYY):/	Surname (in block letters): Given Name : Alias :			
ce of Birth (Place District State & Count	Date of Birth (DD/MM/YYYY) :/			
se of Birtir (Fiace, Bistrice, State & Count	-			
me of Mother: cupation: ether Married (Yes or No); if yes, Name ofsent address in Saudi Arabia:	Spouse & Nation	nality :		
manent address in India:				
age/Town:	Post Office:			
ice Station:	Гehsil/Taluqa : .			
trict:	State:			
N: Telephone No. in Ind	ia:			
ticulars of the passport/travel document sport No Date of issue:		l in Saudi Arabia: ssue:		
acational Qualifications / Details:				
ame of the Institution		Qualification		
chool:	Year			
ollege:	Year			
niversity:	Year			

12.	What was the Occupation before leaving India:					
13.	Details of Employer, along with address, Tel. No. (in India):					
14.	Physical Identification:- a. Heighty: cms. c. Colour of Hair:	b. Colour of Eyes:				
15.	Occupation at Present:					
16.	Reason for detention: Overs Runaway Worker; Cri	minal/Offender of Saud):		
17.	Date/Place of Arrival in Sau	di Arabia / GCC:				
18.	Name, address and telephone/mobile number of TWO respectable / reputed/ well-known persons of the area in India (Sarpanch of the Village, Head of Municipality, School Head Master, Postman and other respectable person) for reference: I.					
	II.					
19.	Name & telephone/mobile rapplicant very well: Name:		onal in Saudi Arabia, who knows the	.e		
20.			n support of personal particulars an	d		
	1					
	2					
and (ii am aw) Information given above in r	espect of myself is correct a r the Passport Act, 1967 to I	the sovereignty and integrity of India and nothing has been concealed and knowingly furnish false information on nishments under the acts,	İ		
Signat	cure of applicant	Thumb Impression (Left for male)	Thumb Impression (Right for female)			
For O	======================================					
Remai	rks of Interviewing Officer/off	icial :				
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			Full Signa	ature		

Applicant's Signature or Thumb Impression