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**NOTE: ADDITIONAL FORM TO BE FILLED IN BY ALL FOREIGN NATIONALS  
IN BOLD AND CAPITAL LETTERS ALONG WITH APPLICATION FORM.**

**DIRECT VISA SECTION FAX NO. +(65) 6732 1462 DATE \_\_\_\_\_**

**FROM: HCI SINGAPORE**

**TO: CGI/HCI/INDEMBASSY/ \_\_\_\_\_**

THE FOLLOWING NATIONAL HAVE APPLIED FOR \_\_\_\_\_

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NAME: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_

PLACE OF BIRTH: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ NATIONALITY: \_\_\_\_\_

PASSPORT NO: \_\_\_\_\_ PLACE OF ISSUE: \_\_\_\_\_

DATE OF ISSUE: \_\_\_\_\_ DATE OF EXPIRY: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

SINGAPORE WP/EP/PR/ (PASS) NO: \_\_\_\_\_

(If any specify please)

PERMANENT ADDRESS: \_\_\_\_\_

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Assistant Consular Officer  
HIGH COMMISSION OF INDIA  
SINGAPORE