**GOVERNMENT OF INDIA MINISTRY OF EXTERNAL AFFAIRS NEW DELHI APPLICATION FORM KNOW INDIA PROGRAMME (KIP)**

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| There will be four Know India Programmes from December, 2016 to January, 2017. Each KIP group will have a different focus State in India. Visit to the focus State would be for 10 days. In addition to the focus state all groups will visit Delhi, Agra and Bengaluru. **Please indicate your preference for which KIPs you would like to attend.** Ministry will make an attempt to include you in the KIP which is your first preference; and fulfilment of all eligibility criteria, as written in the guidelines. |

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| Your Recent Passport size Colour Photo |

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| KIP | Preference (1, 2, 3 & 4)  Write in order of Priortiy | State | Dates | Any specific reason for your first preference. (10 words) |
| 37th KIP |  | Uttar Pradesh | 17 DEC 2016 to 10 JAN 2017 |  |
| 38th KIP |  | Kerala | 17 DEC 2016 to 10 JAN 2017 |  |
| 39th KIP |  | Gujarat | 27 DEC 2016 to 20 JAN 2017 |  |
| 40th KIP |  | West Bengal | 27 DEC 2016 to 20 JAN 2017 |  |

1

**A. PERSONAL DETAILS**

(i) Complete Name (as in Passport in **BLOCK** letters)

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**Last Name**

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**Middle Name**

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**First Name**

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Male Female Transgender

(ii) Gender:

(iii) Date of Birth:

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(iv) Age: (as on 1st November, 2016)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(v) Place of Birth:

(vi) Nationality:  
 (Citizenship):

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(vii) City of Residence:

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(viii) Country of Residence:

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(ix) Passport Details:

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City/Place of issue:

Country in which issued

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Date of issue:

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Date of Expiry:

(x) Telephone Number: (with country and city code)

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Residence:

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Mobile/Cell:

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3

(xi) Complete mailing address with ZIP Code:

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House/Apartment No:

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Name of Street:

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Town/City:

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State:

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Country:

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Zip Code:

(xii) Permanent home address with ZIP Code:

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House/Apartment No:

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Name of Street:

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Town/City:

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State:

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Country:

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Zip Code:

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(xiii) Your or your parents place of origin in India (City or State) :

4

**(xiv) PROOF OF INDIAN ORIGIN (PIO or OCI Card)**

If applicant does not hold a PIO or OCI card, he/she may provide details of PIO or OCI Card of Mother/Father/Grandfather/Grandmother\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PIO Card No:\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Issue\_\_\_\_\_\_\_\_\_\_\_\_\_\_Place of issue\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OCI Card No:\_\_\_\_\_\_\_\_\_\_\_\_\_Date of issue\_\_\_\_\_\_\_\_\_\_\_\_\_\_Place of issue\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Name of any one PIO/OCI card holder (either yourself, you father, mother or grand father/grand mother.

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**Last Name**

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**Middle Name**

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**First Name**

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| --- | --- |
| Parent | Grand Parent |

If the PIO/OCI card holder is your

(Select one of these options :)

* Please attach copy of documentary- Proof of Indian origin\* (copy of PIO/OCI Card mentioned

above.

* If you do not have any proof of Indian Origin, please sign the declaration (last page) and get it attested

by the Head or Deputy Head of the Indian Embassy/Consulate.

**B. Details of International Medical and Travel Insurance policy for the duration of participation in the KIP (can be provided to Embassy/Consulate after your application is accepted)**, and at time of issue of ticket.

Policy No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Company which issued the policy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Valid from (Date)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**C. Details of Family/Relative(s) in India**

(i) Name of your nearest relative/ancestor who migrated from India: if known.

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**First Name**

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**Middle Name**

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**Last Name**

(b) Address of your relative (in India):

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House/Apartment No:

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Name of Street:

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Town/City:

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State:

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Country:

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Zip Code:

(c) Your relationship with him/her

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**D. EDUCATION**

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|  | | Graduate | Undergraduate |
| (i) | Name/Location College/University from where you graduated or are studying. |  |  |
| (ii) | Subjects of study |  |  |
| (iii) | Language of instruction in college/university |  |  |
| (iv) | Describe your English language skills | |  |  |  |  | | --- | --- | --- | --- | | Very Good | Good | Average | Poor | |  | | | | | |

**E. Occupation/Employment: - In last Five Years: 2011 to 2016.**

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| S. No. | Organization/Company (Complete Name and Location address) | Position | Period | |
| From | To |
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**F. Any achievements professional/educational:**

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**G. Interests/hobbies**

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**H. OTHER DETAILS:**

i) Have you participated in a previous **Yes No**

Know India Programme?

If yes – write details here year/month \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(ii) Study India programme **Yes No**

If yes, write year/month here \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(iii) Internship Programme for Diaspora Youth **Yes** **No**

If yes, write year/month here \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(iv) Any other programme/tour organized and

sponsored by Govt. of India or a State

Government in India.  **Yes No**

If yes, write year/month here \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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(v) Have you visited India earlier? If yes,

Please mention month and year of the visits, Purpose:

**(Tourism/Family Visit/Medical/Business/Academic)**

(vi) Please describe, in not more than 100 words, why

you want to participate in the Know India Programme?

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**DECLARATION:**

I, HEREBY, DECLARE THAT ALL THE INFORMATION GIVEN IN THIS Application Form is true and correct to the best of my information and belief.

I also declare that I will abide by the regulations of the Know India Programme, would offer my full cooperation in its smooth conduct, and would not leave it mid-way.

I understand that if I am found guilty of any misconduct or indiscipline during the course of the Programme, I could be refused any further participation in the said programme or participation in any future KIP and that I would not be eligible for reimbursement of the 90% of the return international airfare from my country of residence to India. 90% of the international airfare paid by the Government of India will be repaid to the Indian Mission/Consulate, if I do not complete the KIP.

(Signature of the applicant)

Complete Name of the Applicant

Date:

**COMMENTS OF THE INDIAN MISSION/POST**

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Name of Indian Mission/Post:

Recommendations of the Head of Mission/Post/or DCM/DCG/DHC

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Seal

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**DeclAration**

(**For applicants who do not possess any documentary evidence of Indian Origin**)

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (complete name) born on \_\_\_\_\_\_\_\_\_\_\_\_ (Date of birth), daughter/ son of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Complete name do hereby state that I am of Indian origin because of the following reasons

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature of the Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complete Name:- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:------------------

Place: ----------------

Countersigned and stamped by

Head of Indian Mission or DCM/DHC/DCG

Complete Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Seal:-

Place: \_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_

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