

EMBASSY OF INDIA, BANGKOK

Fax Nos: 662-2584627, 662-2621740 & 662 2594871

e-mail: cons.bangkok@mea.gov.in

Additional form to be filled in by Non-Residents(Non-Thai Nationals) alongwith Visa Application form (TO BE FILLED IN CAPITAL LETTERS)

	1.	. NAME OF THE APPLICANT :	
	2.	. FATHER'S NAME: 3. NATIONALITY:	
	4.	. DATE & PLACE OF BIRTH:	
	5.	. PASSPORT NO, DATE & PLACE OF ISSUE:	
	6.	. PROFESSION:	
		. PERMANENT ADDRESS: (in country of origin)	
	8.	. TYPE OF VISA HOLDING FOR STAY IN THAILAND:	
	9.	. WHETHER VISA HAD BEEN REFUSED EARLIER, IF YES , GIVE DETAILS :	
	10	0. WHEATHER YOU HAD BEEN DEPORTED/ REFUSED ENTRY TO INDIA EAR IF YES , GIVE DETAILS:	LIER,
Democratica		Signature of Applicar	it
(F		R OFFICE USE ONLY) Date:	
		EMBASSY / HICOMIND / CONGENDIA	
Gı	ate	teful send clearance by return fax. If no response is received withings visa will be granted as per GOI instructions after local check.	n 72 Cost