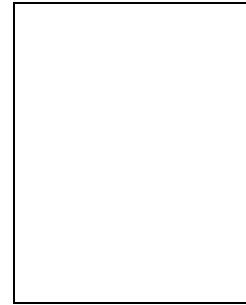


**GOVERNMENT OF INDIA  
MINISTRY OF EXTERNAL AFFAIRS  
NEW DELHI**

**APPLICATION FORM FOR KNOW INDIA PROGRAMME (KIP)**



KIP No.

**A. PERSONAL DETAILS**

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

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Last Name

Middle Name

First Name

(ii) Gender : Male/Female

(iii) Date of Birth: 

D	D	M	M	Y	Y	Y	Y
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(iv) Place of Birth 

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(v) Nationality 

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(vi) Place of Residence 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(vii) Passport Number 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Place of issue: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(City)

(Country)

Date of issue: 

--	--	--	--	--	--	--	--

Date of Expiry: 

--	--	--	--	--	--	--	--

(viii) Telephone Number: (with country and city code) Work 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

  
Residence 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mobile/Cell 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Fax Number 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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

(ix) Complete mailing address with ZIP Code: \_\_\_\_\_

\_\_\_\_\_

(x) Permanent home address with ZIP Code: \_\_\_\_\_

(xi) Your or your parents place of origin in India : \_\_\_\_\_

Applicant should also fill up details at Annexure A, B ,C, otherwise his candidature will be liable for rejection.

**(Signature of the Applicant)**  
**Name of the Applicant**

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

(i) Name, address (if available) and your relationship with your nearest relative who migrated from India:

(a) Complete Name 

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(b) Last Known address of your relative 

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(c) Your relationship with him/her 

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(d) Mobile number of your relative with city code 

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**C. EDUCATION**

		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		

**D. Occupation/Employment:**

S. No.	Organization/Company (Complete Name and Location address)	Position	Period	
			From	To

**E. Any achievements professional/educational or other that you want to share with us:** \_\_\_\_\_

**F. Your interests/hobbies** \_\_\_\_\_

