GOVERNMENT OF INDIA MINISTRY OF EXTERNAL AFFAIRS NEW DELHI

APPLICATION FORM FOR KNOW INDIA PROGRAMME (KIP)

KIP Edition No.		Attach Recent Passport size photo
QualificatiorCertificatePIO/OCI/A	ttachall requireddocument s uchas Innexure- © ,asspor S izeColoredPho Iinghe sameto the IndianMissions/F	otograph& other relevan
A. PERSONAL DETAILS		
(i) Complete Name (as in Pass	port in BLOCK letters)	
First Name	Middle Name	Last Name
(ii) Gender :	Male/Female	
D D M M Y Y Y		
(iii) Date of Birth:		
(iv) Place of Birth		
(v) Nationality		
(vi) Place of Residence		
(vii) Passport		
Number		
Place of issue:		
(City) Date of issue:	(Country)	

Date of Expiry: (viii) Telephone Number: (with country and city code) Work			
Residence			
Mobile/Cell			
Fax Number			
rax 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 :			
B. <u>Proof of Indian Origin</u>			
Hold PIO/OCI Card - Yes/No			
PIO Card No:Date of IssuePlace of issue			
OCI Card No: Date of issue Place of issue			
Please write details of PIO or OCI Card of your Mother/Father/Grandfather			
Name of PIO/OCI Card holder			

C. <u>Details of Family/Relative(s) in India</u>

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

(c) Your	nplete Name Known address of your relative relationship with him/her bile number of your relative with city	Toode	
(i) (ii) (iii)	Name/Location College/University from where you graduated or are studying. Subjects of study Language of instruction in college/university Describe your English	Graduate	Undergraduate
	language skills		
E. <u>C</u>	(Complete Name and	Position From	Period om To
S. N	o. Organization/Company	Fro	om To

International Medical and Travel Insurance Policy	
Policy No. –	
Name of the insurance company –	
Valid from (Date) –	
Valid until –	
	Annexure-A
OTHER DETAILS:	
Have you participated in a previous Know India Programme? If yes, provide details.	Yes / No
Have you visited India earlier? If yes, please month and year of the visits, places visited and purpose:	Yes / No
Has any sibling/ relative of yours attended KIP before	Yes / No
Please describe, in not more than 250 words, why do	

Annexure-B

DECLARATION:

H.

I.

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

you want to take part in the Know India Programme?

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. The said reimbursement of 90% of the international airfare would also not be made to me if I leave the Programme mid-way.

Date	:		(Signature of	the applica	ant)
Place					
				Annexur	<u>e-C</u>
	DECLA	RATION			
	(For applicants who do not possess any	y documentary evid	ence of Indian	Origin)	
Ι_					
	(Date of birth				
(Co reaso	mplete name) do hereby state that I	am of Indian orig	in because of	the follow	ving

Signature of the Applicant:				
orginations of the Applicant.	Complete Name:			
Date:				
Place:	_			
	Countersigned and stamped by			
	Head of Indian Mission or DCM/DHC/DCG			
	Complete Name:			
	Office Seal:			
Date:				
Place:				
	A B			
	Annexure-D			
COMMENTS OF THE CONCERNED INDIAN MISSION/POST				
Name of Indian Mission/Post:				

Signature of HOM/HOP _	
Name of the HOM/HOP_	
Office Seal	