MINISTRY OF OVERSEAS INDIAN AFFAIRS Government of India New Delhi

APPLICATION FORM FOR $18^{\rm th}$ KNOW INDIA PROGRAMME (KIP) TO BE HELD FROM $21^{\rm ST}$ SEPTEMBER 2011 TO $11^{\rm th}$ OCTOBER 2011

Attach Recent Passport Size Photograph PERSONAL PARTICULARS (i) Name (as in Passport in BLOCK letters) (Middle Name) (Surname) (First Name) (ii) Gender Male/Female Date of birth Place of birth -----(iii) (iv) (dd/mm/yyyy) (City) (Country) Nationality -----(v) (vi) Domicile -----(Country where you live in permanently) (vii) Marital status -----(viii) **Passport Particulars** No. -----Place of issue (City) (Country) Date of issue (dd/mm/yyyy) Date of Expiry (dd/mm/yyyy) (ix) Telephone number: Work -----Residence-----(With country and city code) Mobile/Cell -----

Fax Number

(With country and city code) E-mail Address

(x)	Complete mailing address with PIN/ZIP Code						
(xi))	Peri	manent home address with PIN/ZIP Co	de			
(xii	(xii) Name, address (if available) and your relationship with your ancestor who migrated from India:						
		(b) (c)	Name Last known address Your relationship with him/her The year when he/she migrated from I	ndia, if known			
(xii	Particulars in respect of your closest relative in India:						
		(b) (c)	Name Present address Your relationship with him/her Contact telephone numbers with city of	ode			
EDUCA	ATIONAL AN	ND I	PROFESSIONAL PARTICULARS				
1.	Educational qualification						
	(i)		Graduate / Undergraduate				
	(ii)		State the name and address of the College/University from where you completed graduation or under graduation or is doing or have joined for graduation				
	(iii)		Subjects of study				
	(iv)		Medium of instruction				
2.	Qualification in English language						
3.	Details of Occupation/employment:						
S.N.	Orç		anization/Office/Firm (Name and address)	Position held	Period FromTo		

	Telephone number: Work				
	Telephone number: (With country and city code)	Mobile/Cell			
	Fax Number				
	(With country and city code)				
	E-mail Address				
5.	Personal Achievements, If any				
ОТНЕ	ER DETAILS				
1.	Details of Community Activities, if undertaken:				
2.	Are you a member of any Overseas Indian Association/Organization? If yes, give its name And address				
3.	How did you come to know about the KIP? (Through an Indian Diplomatic Mission/Post, Media advertisement, a previous participant or others- to be specified)				
4.	Have you participated in a previous Know India Programme? If yes, provide details.	Yes/N			
5.	Have you visited India earlier? if yes, please provide details of your last two visits including the month and year of the visit, places visited and the purpose for your visit				
6.	Has any sibling / relative of yours attended KIP	before Yes/N			
7.	Please state, in not more than 250 words, why contains know India Programme and what do they expect				

DECLARATION						
	hereby, declare that all the information given in this Application Form are true and correct to the best of my information and belief.					
W	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 nid-way.					
C O re re	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 or participation in any future KIP and that I would not be eligible for eimbursement of the 90% of the return international airfare from my country of esidence 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.					
	(Signature of the applicant) Name of the applicant					
Date:						
ENDORSEMENT OF THE CONCERNED INDIAN MISSION/POST						
Name of Indian Mission/Post:						
Recommendations of the Head of Mission/Post						
	Signature of HOM/HOP					

Name of the HOM/HOP_

Date

Office Seal