VAKZONE
GLOBAL SERVICES

Passport Application / Renewal Form

[For Office Use Only – Application No : _____]

1. Service Type (Tick the Appropriate Option)

□ New Passport □ Re-Issue / Renewal

□ Change in Existing Details □ Lost / Damaged Passport

2. Applicant's Personal Details

Name (as per documents):_____

Surname: _____ Given Name(s): _____

Have you ever changed your name? □ Yes □ No If Yes, Previous Name: _____

Gender: □ Male □ Female □ Others Date of Birth (DD/MM/YYYY): _____

Place of Birth (Town/District/State/Country): _____

Marital Status: □ Single □ Married □ Divorced □ Widowed

Citizenship by: □ Birth □ Descent □ Registration/Naturalization

PAN Number: _____ Voter ID (if available): _____

3. Family Details

Father's Full Name: _____ Mother's Full Name: _____

Legal Guardian (if applicable): _____ Spouse's Name (if married): _____

4. Address Details

Present Residential Address:

Flat/House No.: _____ Street/Area: _____

City/Town/Village: _____ District: _____

State/UT: _____ PIN Code: _____

Mobile Number: _____ Email ID: _____

Is permanent address same as present? □ Yes □ No

If No, fill in below: Permanent Address: _____

_____PIN Code: _____

5. Educational Qualification (Tick One)

□ Below 10th □ 10th Pass □ 12th Pass □ Graduate □ Post Graduate and above

6. Employment Details

□ Government □ PSU □ Private □ Retired □ Student □ Self-Employed □ Housewife □ Unemployed

Organization Name (if applicable): _____

Designation: _____ Office Address: _____

Do you hold a diplomatic/official passport? □ Yes □ No

7. Passport Details (Only for Re-Issue/Renewal)

Previous Passport Number: _____ Date of Issue: _____

Place of Issue: _____ Date of Expiry: _____

Reason for Reissue: □ Expired/Expiring □ Lost □ Damaged □ Change in Details □ Exhaustion of Pages

8. Emergency Contact Details

Name: _____ Relationship: _____

Contact Number: _____ Full Address: _____

_____

9. Other Details

Nearest Police Station: _____

Address: _____

Phone: _____

10. Documents Submitted (Tick all that apply)

□ Aadhaar Card □ PAN Card

□ Voter ID □ Birth Certificate

□ Address Proof (e.g. Electricity Bill)

□ Education Certificate

□ Marriage Certificate (if applicable)

□ Previous Passport (for reissue)

□ Police Clearance Certificate (PCC)

□ Annexure E (for minors/special cases)

11. Declaration

I, _____, do hereby declare that all the information furnished above is true and correct to the best of my knowledge and belief. I authorize **VAKZONE GLOBAL SERVICES** to apply for my passport on my behalf.

Signature of Applicant

Date:

Place: