



HIGH COMMISSION OF INDIA

DHAKA (BANGLADESH)

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Size: 2" X 2"



Visa Application Form



BGDDVFFF626

Signature

A. Personal Particulars (As in Passport)				
Surname (As in Passport)		SHAKIL		
Given Name (As in Passport)		MD ABDULLAH AL		
Previous/other Name if any		Not Applicable		
Gender	MALE	Marital Status	SINGLE	
Date of Birth	02-AUG-2001	Religion	ISLAM	
Place of Birth Town/City	PANCHAGARH	Country of Birth	BANGLADESH	
Citizenship /National ID No	9162851241	Educational Qualification	GRADUATE	
Visible identification marks		NA		
Current Nationality	BANGLADESH	Nationality by Birth/ Naturalization	BY BIRTH	
Any Other Previous/Past Nationality		Not Applicable		
B. Passport Details				
Passport No.	A09748816	Date of Issue (dd/mm/yyyy)	25-JUL-2026	
Place of Issue	DHAKA	Date of Expiry (dd/mm/yyyy)	24-JUL-2036	
Any other Passport/Identity Certificate held (if yes ,please fill in the following)			NO	
Country of Issue		Place of Issue		
Passport/IC No.		Date of issue (dd/mm/yyyy)		
Nationality/Status				
C. Applicant's Contact Details				
Present Address	15/2, EAST SHEWRAPARA BINDU BRITTO GOLI, KAFRUL, MIRPUR DHAKA, BANGLADESH 1216	Phone No	01784918947	
Permanent Address	VILL-SONAPARA OVIRAM KRIJA BADULLAH BODA, MOYDANDIGHI - 5010 PANCHAGARH	Mobile /Cell No	8801784918947	
		Email address	SHAKIL3300BD@GMAIL.COM	
D. Family Details				
Relation	Name	Nationality	Prev. Nationality	Place/Country of Birth
Father's	MD ABU SAMA	BANGLADESH	BANGLADESH	PANCHAGARH BANGLADESH
Mother's	MST SHABANA BEGUM	BANGLADESH	BANGLADESH	PANCHAGARH BANGLADESH
Marital Status	Single			
Were your Grandfather/Grandmother(Paternal/Maternal) Pakistan Nationals Or belong to Pakistan held area : NO				



MD ABDULLAH AL SHAKIL

Web Registration Date : 11-SEP-2026 Application Id : BGDDVFFF626

E. Details of Visa Sought (Visa shall be valid from the Date of Issue and not from the Date of Journey)			
Type Of Visa Required	TOURIST VISA	No of Entries	MULTIPLE
Period of Visa (Month)	12 Month	Expected Date of Journey	30-SEP-2026
Port Of Arrival	BY ROAD CHANGRABANDHA	Port of Exit	BY ROAD CHANGRABANDHA
Required Detail of TOURIST VISA			
Places to be Visited	SANDAKPHU, KALIMPONG, MIRIK, DARJEELING, SIKKIM		
""	NA		
Purpose of Visit : FOR TOURISM RECREATION, SIGHTSEEING CASUAL VISIT TO MEET FRIENDS OR RELATIVES, ATTENDING A SHORT TERM YOGA PROGRAMME, SHORT DURATION MEDICAL TREATMENT (INCLUDING TREATMENT UNDER AYUSH SYSTEMS), SHORT TERM COURSES ON LOCAL LANGUAGES, MUSIC, DANCE , ARTS AND CRAFTS, COOKING, MEDICINE ETC. WHICH SHOULD NOT BE A FORMAL OR STRUCTURED COURSE/PROGRAMME (COURSE NOT EXCEEDING 6 MONTHS DURATION AND NOT ISSUED WITH A QUALIFYING CERTIFICATE/DIPLOMA ETC.) AND VOLUNTARY WORK OF SHORT DURATION(FOR A MAXIMUM PERIOD OF ONE MONTH, WHICH DO NOT INVOLVE ANY MONETARY PAYMENT OR CONSIDERATION OF ANY KIND IN RETURN ETC. AND NO OTHER PURPOSE/ACTIVITY.			
F. Previous Visit Details			
Have You Ever visited India ?	NO		
Address where You stayed in India	,		
Cities in India Visited			
Type of Visa		Visa Number	
Visa Issued Place		Date of Issue	
Countries visited in last 10 years	NO COUNTRIES		
Have you been refused an Indian Visa or extension of the same previously or deported from India ? NO			
G. Profession/Occupation Details :			
Present Occupation	PRIVATE SERVICE	Designation/Rank	EXECUTIVE
Employer name/business	SERVICENGINE		
Employer Address	111 BIR UTTAM C R DUTTA ROAD, LEVEL 7, DHAKA		
Phone Number	8809606221937		
Past occupation if any	PRIVATE SERVICE		
Are/have you worked with Armed forces/ Police/ Para Military forces ?			NO
Organization		Designation	
Place of Posting		Rank	
H. Address of Place of Stay / Hotel			
Place/Hotel Name	Address of Place / Hotel	State	Phone No
1 GLORY HOMESTAY MANE BHANJANG MAJUA WEST BENGAL 734221 INDIA DARJILING WEST BENGAL. +918116388034,			
2 SPARROW CHERRY RESORT CHURCH RD NEAR OLD PELLING STAND MG MARG GANGTOK EAST SIKKIM SIKKIM. +919800300919,			
3 KAMAL LODGE 63 RAFI AHMED KIDWAI RD ESPLANADE TALTALA KOLKATA KOLKATA WEST BENGAL. +917044153068,			
4 . ,			
I. Details of Two Reference			
	In India	In BANGLADESH	
Name	GLORY HOMESTAY	MD ABU SAMA	
Address	MANE BHANJANG, MAJUA, WEST BENGAL 734221, INDIA DARJILING WEST BENGAL	VILL-SONAPARA OVIRAM KRIJA BADULLAH BODA, MOYDANDIGHI-5010, PANCHAGARH	
Phone Number	+918116388034	01716610045	
I. DOCUMENTS UPLOADED			
1) Copy of Passport page containing personal particulars			
K. DECLARATION			
a. I do not hold any other passport(s) other than those detailed above.			
b. I have read and understood all the conditions for the visit to India and I am willing and able to abide fully by them.			
c. I declare that the information given in the form is complete and correct and the visit to India will be undertaken for the purpose indicated in the application.			
d. I understand that in case the information provided in the form is found to be incorrect, I will be liable for denial of visit/ entry or deportation and/ or other penalties during the visit as provided by Indian law.			
e. I will also submit hard-copy all the uploaded documents along with the print of application to submit to the concerning Indian Mission or Agency for processing of visa application.			

11-SEP-2026

Date :

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Applicant's signature (as in Passport)

Application Id : BGDDVFFFFF626