



Ministry of Foreign Affairs  
Embassy of the Kingdom of Bahrain  
Consular Division  
India - New Delhi - 110057



VISA APPLICATION FORM

First Name  Middle  Last

Occupation  Gender: Male  Female

Date of Birth (mm/dd/yy)  Place of Birth

Passport Number  Place of Issue

Issue Date  Expiry Date

Address in the India

City  State  Zip Code

Telephone  Cell  Fax

E-mail

Social Security No (*if applicable*)

Reason for traveling to Bahrain  Duration of proposed visit

Address in Bahrain  Date of Arrival

References and address of sponsor in Bahrain  Name of family (wife & children) accompanying applicant (*each applicant must apply individually*)

Duration of previous residence and address when last in Bahrain

Attach a letter from authority which recommends granting the required visa  
(*For Official or Diplomatic Visas Only*)

Attach a letter stating the purpose and duration of the visit and the applicant's responsibility for all travel expenses

I hereby declare the details and information given in this application are true and correct.

Place  Date  Signature