

## Form A Embassy of Pakistan Seoul \*\*\*

Photograph

| FOR                                  | M A .FOR I                                      | PERSON A                 | BOVE    | 12 YEA     | RS       |                        |     |               |       |            |                           |                         |          |                          | •       |       |      |     |
|--------------------------------------|---|--------------------------|---------|------------|----------|------------------------|-----|---------------|-------|------------|---------------------------|-------------------------|----------|--------------------------|---------|-------|------|-----|
| PER                                  | SONNEL I  | NFORMA                   | TION    |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
|                                      |   |                          |         |            | First    |                        |     |               |       | Middle     |                           |                         |          | Surname                  |         |       |      |     |
| 1                                    | Applicant Name (block letter):                  |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 2                                    | FATHER'S/ HUSBAND'S NAME:                       |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 3                                    | FATHER'S NATIONALITY:                           |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 4                                    | DATE OF BIRTH: (DD                              |                          |         | MM Y       |          |                        | YY) | Y) (in words) |       |            | s)                        |                         |          |                          |         |       |      |     |
|                                      |   |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 5                                    | PLACE OF BIRTH:                                 |                          |         | VILL./TOWN |          | TEHSIL                 |     |               | ,     | DISTT.     |                           | Т.                      | PROVINCE |                          | INCE    |       | COUN | TRY |
|                                      |   |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 6                                    | RELIGION  | LIGION: 7 QUALIFICATION: |         | N:         |          | 8                      |     | PROFESSION:   |       |            |                           |                         |          |                          |         |       |      |     |
| 9                                    | PAKISTANI NATIONALS                             |                          |         |            | BY       | BY BIRTH               |     |               | BY    | BY DESCENT |                           |                         |          |                          |         | RATIO | N    |     |
|                                      | (TICK THE BOX IF APPLICABLE)                    |                          |         |            |          |                        | BY  | NAT           |       |            |                           |                         |          | Y MIGRATION ON<br>(DATE) |         |       |      |     |
| 10                                   | COMPUTERIZED ID CARD NO (CNIC/NICOP)            |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 11                                   | PLACE OF ISSUE (CNIC/NICOP)                     |                          |         |            |          | 12                     |     |               |       |            | TE OF ISSUE<br>NIC/NICOP) |                         |          |                          |         |       |      |     |
| 13                                   | PERMANENT ADDRESS IN PAKISTAN                   |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
|                                      |   |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 14                                   | PRE   | SENT AD                  | DRESS   | SS IN KO   | OREA     |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
|                                      |   |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 15                                   | PRESENTCONTACT Home:                            |                          |         |            |          |                        |     |               | work  |            |                           |                         |          |                          |         |       |      |     |
|                                      | MOBILE  |                          |         |            |          |                        |     |               |       | E-MAIL:    |                           |                         |          |                          |         |       |      |     |
| 15                                   | PERMANENT CONTACT (Pakistan)                    |                          |         |            | Home     |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
|                                      | MOBILE (give contact name also)                 |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 16                                   | For AJ &K Applicant Applicant's Father/Husband] |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| 17                                   | Children  |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| S. No. Full Name (Block letters) Pla |   |                          |         |            | Place    | lace and Date of Birth |     |               |       |            |                           |                         | Sex      |                          |         |       |      |     |
|                                      | 1   |                          |         |            |          |                        |     |               |       |            | Male                      |                         |          | Female                   |         |       |      |     |
|                                      | 2   |                          |         |            |          |                        |     |               |       |            |                           | Ma                      | Male     |                          | Female  |       |      |     |
| 3                                    |   |                          |         | N          |          |                        |     | Ma            | ale   |            | Female                    |                         |          |                          |         |       |      |     |
| For office use only                  |   |                          |         |            |          | Signa                  |     |               |       |            | atur                      | ture & Thumb Impression |          |                          |         |       |      |     |
|                                      |   |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
|                                      |   |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
|                                      |   |                          |         |            |          |                        |     |               |       |            |                           |                         |          |                          |         |       |      |     |
| *Not                                 | e : Please at                                   | tach 4 colo              | ured ph | otograpł   | n, one p | hotoc                  | opy | of p          | asspo | rt, C      | CNIC                      | NICO                    | P and    | Ali                      | en Card | 1     |      |     |

| Declaration  |
|--|
| (a) No. of the attached passport/travel document   |
| (b) Date of issue(c) Place of Issue  |
| para (4) below.  Declaration for Lost Passport   |
| Deciar ation for Dost Lassport   |
| <ul><li>(4) The passport as per details given below has been lost. In the event if it's coming again into possession I under take to return it to the Regional Passport Office.</li><li>(a) Passport No</li></ul>              |
| <ul><li>(c) Place of Issue</li></ul>   |
| (6) I am/am not a Government servant an employee of a semi-Government body a municipality any other local body or a state-owned industry.  |
| <ul><li>(7) I have/have not served in the Armed Forces.</li><li>(8) I am/am not-reservist in the Armed Forces.</li></ul>   |
| DECLARATION IN CASE OF MUSLIMS   |
| I  |
| Years, adult Muslim, Resident ofhereby   |
| solemnify declare that: (i) I am Muslim and believe in the absolute and unqualified finality of the prophet hood of  |
| Muhammad (peace be upon him) the last of the prophets.  (ii) I do not recognise any person who claims to be a prophet in any sense of the word or of any   |
| desception whatsoever after Muhammad (peace be upon him) or recognise such a claimant as prophet or a religious reformer as a Muslim.  |
| (iii) I consider Mirza Ghulam Ahmad Quadiani to be an imposter nabi and also consider his followers whether belonging to the Lohori or Quadiani group to be Non-Muslim.  |
| Date   |
| Signature & Thumb Impression ( with name in block letter of applicant in indelible ink)  |
| <u>ATTESTATION</u>   |
| Applicable in cases of persons who have not attained the age of 18 years and are not issued with identity card under the National Registration Act, 1973.  |
| I.ad Father/Guardian/Attestor hereby attest that the information given above is correct to the best of my knowledge and belief and that the photograph on page 1 of this application bears the true likeness of the applicant. |
| Signature of Father/Guardian/Attestor.   |
| Address Identity card No. Date   |
| Place of Issue   |
| FOR OFFICIAL USE ONLY  |
| 1. No. of Passport issued  |
| 2. Date of Issue   |
| 3. Date upto which Passport is Valid   |
| Name   |