

# Consulate General of India

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Form MS-19

Fee: \$25

ICWF: \$2

## APPLICATION FOR NO OBJECTION/RESEARCH PROJECT CLEARANCE CERTIFICATE

	<i>First</i>	<i>Middle</i>	<i>Last</i>
1.Applicant's Name			
2.Date of Birth		(DD/MM/YYYY)	
3.Place and Country of birth			
4.Current Nationality			
5.Former Nationality			
6.Father's name and Nationality			
7.Mother's name and Nationality			
8.Spouse name			
9.Spouse current and Former Nationality			
10.Permanent Address in India			
11.US Address			
12.Profession & Business Address			
13.Mobile Number			
14.Email ID			
15.Passport Number			
16.Place and Date of Issue			(DD/MM/YYYY)
17.Date of Expiry		(DD/MM/YYYY)	
18.PIO/OCI card Number		Place of issue	
19. Do you belong to Armed Forces of the US	<input type="checkbox"/>	Yes	<input type="checkbox"/> No

I declare that the information given above is correct and nothing has been concealed and I am aware that it is an offence to knowingly furnish false information or suppress material information.

Place :

Date:

Signature