SWORN AFFIDAVIT

We hereby declar	e that Mst./Ms	
born on	at	, Poland/Lithuania for
whom an Indian passpo	ort is applied for has not o	btained passport/nationality
of Poland/Lithuania or o	of any other country.	
If the above infor	rmation is found to be inc	correct, action may be taken
against me/us according	g to the Indian Passport Ad	ct. We also do not have any
objection to issue of an	Indian Passport in respect	of our child.
Place: Date:		
	(Father's Signature) Name: Passport No.: Dated: Address in Poland Tel. No.	(Mother's Signature) Name: Passport No.: Dated: Address in Poland Tel. No.