

BIOMETRIC EXCEPTION FORM

This is to certify that the finger print of Mr/Mrs/Ms _____
URN Number _____, was not as per IVFRT requirements due to
following reason(s) [Tick the relevant reason]

1. Exempted as per the guidelines of the mission/IVAC/ICP.
2. Quality of the fingers is poor and could not be captured even after three attempts.[Kindly tick the appropriate fingers in table below]
3. Missing finger [Tick the appropriate missing finger]

Left Index
Left Middle
Left Ring
Left Thumb
Left Thumb
Right Index
Right Middle
Right Ring
Right Little
Right Thumb

***Applicant's Signature:** _____

Name, Designation & Signature of Enrollment Officer [IVAC / Indian Mission/ Immigration] :

Name, Designation & Signature of Reporting Officer Of Enrollment Officer [IVAC / Indian Mission/ Immigration] : _____

Office seal (only in case of outsourcing agency):

*** Applicant's Signature not required in case of Reason No 1 & 2 above.**