**Information for request of invitation letter for Indian VISA application**

Title (Prof./Dr./Mr. etc):

First Name:

Family Name:

Company/ Institute Name:

Address:

City:

ZIP/Postal Code:

Country:

Email ID:

Did you submit a paper to the meeting:

Title of the talk/ manuscript:

Passport number:

Passport issuing country:

Date of Birth (DD/MM/YYYY):

Note: Please email pdf of completed form to: rcaop@caluniv.ac.in with CC to: optoin24@csio.res.in