Application For Issue of Visitor's Pass

1.	Names(s):	
2.		
3.	Father's Name:	
4.		
5.		
6.	Recommended by: (a)	Senior Advocate
	(b)	Advocate
	(c)	Officer of the Court
7.	Pass required for entry to Court N)
		Item No
8.	Purpose of visit:	
9.	Date:	
	gnature of the person:	
	commending the application	
W	ith Seal/Stamp	Clauselana of the Angellana (A
		Signature of the Applicant(s)
	Applicat	on For Issue of Visitor's Pass
1.	Names(s):	
2.		
3.	5	
4.		
5.		
6.		Senior Advocate
	•	Advocate
		Officer of the Court
7.	. ,	
	Pass required for entry to Court N	1.
8.	Pass required for entry to Court N	
9.	•	Item No
	Purpose of visit:	
	Purpose of visit:	Item No
•	Purpose of visit: Date: gnature of the person:	Item No
re	Purpose of visit: Date: gnature of the person: commending the application	Item No
re	Purpose of visit: Date: gnature of the person:	Item No

Signature of the Applicant(s) **NOTE: Passes will be issued on first come first serve basis and subject to the availability of seats in the court rooms.**