

To,

Visa Officer

<Embassy of India, Berlin OR CGI, Munich/Hamburg/Frankfurt> <based on your jurisdiction>

Dear Sir,

..... (Patient's name) has been advised to undergo ..... (diagnosis) at .....

(Name of hospital/wellness center and place) by our Sr. Consultant,.....

( Consultant's name), Department of ..... (Speciality).

The cost of treatment will be ..... ( cost ) and the duration of the treatment will be

..... (duration).

Passport details are given below for your kind reference.

Name of the Patient .....

Nationality of the patient

Passport number.....

Passport expiry date .....

Name(s) of the Attendant of the Patient

Nationality of the Attendant of the Patient

Passport number Attendant of the Patient.....

Passport expiry date .....

We request you to kindly issue visa to him/ her.

Thanking you and looking forward to an early action from your side.

Yours sincerely

**Authorized Signatory**

**Stamp of the Organisation/Hospital**

**Telephone number : .....**

**Fax number : .....**

**Email: .....**