



Under Section 3 of THE AADHAAR (TARGETED DELIVERY OF FINANCIAL AND OTHER SUBSIDIES, BENEFITS AND SERVICES) ACT, 2016 (Aadhaar Act)

AADHAAR ENROLMENT/ CORRECTION/ UPDATE FORM

Aadhaar Enrolment and Mandatory Biometric Update is free. No charges are applicable for Form. In case of Correction/ Update, provide your Aadhaar Number (UID), Full Name and only that field which needs Correction/ Update.

Resident Non-Resident Indian (NRI*) Please follow the instructions overleaf while filling up the form. Use capital letters only.						
1	Pre Enrolment ID (If applicable):		2 In case of Update provide Aadhaar Number (UID):			
2.1	Biometric Update (Photo + Fingerprint + Iris) Mobile Date of Birth Address Name Gender Email					
3	Full Name:					
4	Gender: Male Female Transgender		Age: Yrs OR Date of Birth: DD MM YYYY Declared Verified			
6	Address: C/o NAME					
	House No./ Bldg./ Apt:		Street/ Road/ Lane:			
	Landmark:		Area/ Locality/ Sector:			
	Village/ Town/ City:		Post Office:			
	District:	Sub-District:		State:		
	E-Mail:	Mobile No.:	Mobile No.: PIN Code:			
7	Details of: Father Mother Guardian Husband Wife For children below 5 years Father/Mother/Guardian's details are mandatory. Adults can opt not to specify this information.					
	Name: EID/ Aadhaar No.:					
Verification Type: Document Based Introducer Based Head of Family (HoF) Based Select only one of the above. Select Introducer or Head of Family only if you do not possess any documentary proof of identity and/ or address. Introducer and Head of Family details are not required in case of Document based verification.						
8	For Document Based (Write Names of the documents produced. Refer overleaf of this form for list of valid documents)					
a.	a. POI		b. POA			
C. (Mai	C. DOB (Mandatory in case of Verified Date of Birth)		d. POR (Mandatory in case of HoF based Enrolment/ Update)			
9	For Introducer Based – Introducer's Aadhaar No.:	For HoF Based - Details of : Father Mother Guardian Husband Wife HoF's EID/ Aadhaar No.: I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I I				
I hereby confirm the identity and address ofas being true, correct and accurat						
Introducer/ HoF's Name: Signature of Introducer/ HoF						
Disclosure under section 3(2) of THE AADHAAR (TARGETED DELIVERY OF FINANCIAL AND OTHER SUBSIDIES, BENEFITS AND SERVICES) ACT, 2016 I confirm that I have been residing in India for at least 182 days in the preceding 12 months / I am Non Resident Indian (NRI) & information (including biometrics) provided by me to the UIDAI is my own and is true, correct and accurate. I am aware that my information including biometrics will be used for generation of Aadhaar and authentication. I understand that my identity information (except core biometric) may be provided to an agency only with my consent during authentication or as per the provisions of the Aadhaar Act. I have a right to access my identity information (except core biometrics) following the procedure laid down by UIDAI.						
	Verifier's Stamp and Signature: (Verifier must put his/ her Name, if stamp is not available) Applicant's signature/ Thumbprint					

To be filled by the Enrolment Agency only:

Date & time of Enrolment: ____

Note: In case of minor, the signature will be done by parent/guardian. In case of incapacitated person, the signature will be done by Legal Guardian of Incapacitated Person * In case of NRI, only Indian Passport will be valid as POI.

CERTIFICATE FOR AADHAAR ENROLMENT/ UPDATE							
Instructions: All details to be fil	led in Block Letters		(To be valid for 3 months from date of issue)				
To be printed on plain A4 paper	size; Not required to print on	letter head;	D D M M Y Y Y Y				
Resident's Details							
	Resident N	Non-Resident Indian (NRI)	New Enrolment Update Request				
Aadhaar Number: (For update only) Full Name:							
<u>Cla</u>							
C/o:							
House No./ Bldg./ Apt:							
Street/ Road/ Lane:							
Landmark:							
Area/Locality/Sector:							
Village/ Town/ City:							
Post Office:							
District:							
State:			Resident's Recent Colour Photograph 3.5cm x 4.5 cm				
			Cross Signed and Cross Stamped by the Certifier.				
PIN Code:		Signature of t	he Resident/				
Date of Birth:		Thumb/ Finge	r Impression				
	Certifier's Detai	ls (To be filled by the certifier	Only)				
Name of the Certifier:							
Designation:							
Office Address:							
Contact Number:							
I hereby certify above mentioned details of the resident and I am a (Tick appropriate box below) Checklist for Certifier No overwriting Issue date is filled Resident's signature Certifier's d							
Gazetted Officer - Group A		Resident's Photo is cross signed and cross stamped (paper to photo or photo to paper)					
 Village Panchayat Head Gazetted Officer - Group MP/ MLA/ MLC/ Muncip Tehsildar 	р В						
Head of Recognized Edu	ucational Institution						
Superintendent/ Warden/ Matron/ Head of Instituti of Recognized shelter homes/ Orphanages		Signature 9	Stamp of the Cortifier				
EPFO Officer		Signature &	Stamp of the Certifier				

NOTE: This format is applicable for POI documents at SI. Nos. 17, 20, 21, 22, 31 & 32; POA documents at SI. Nos. 23, 24, 37, 38, 44 & 45; POR documents at SI. Nos. 13 & 14 DOB documents at SI. Nos. 4, 5, 14 & 15 of Schedule II of the Aadhaar (Enrolment and Update) Regulations, 2016, as amended from time to time.