FORM 3: Aadhaar Enrolment and Update

For (a) Resident Indian child, or (b) Non-Resident Indian child having Proof of Address in India (aged 5 years and above and less than 18 years)

Please follow the instructions given below this form and use only upper case (block or capital) letters.

1	Purpose:	Enrolmen	nt OR		Update										
2	Resident status: Resident Indian OR Non-Resident Indian (NRI) {See paragraph 1(c) of the declaration below this form}												form}		
3	Demographic inf	ormation (For	· update, please	fill onl	y the informa	tion to be i	updated):								
	(a) Name:														
	(Please fill as given in		sented in supp	ort of th	e POI, while	omitting ar									
	`	Female	(c) Date	of Birth: (DDMMYYYY) OR Age: years											
	Male	rified OR Declared OR Approximate (only for age)													
	Third gender	ared or approximate, only year of declared/approximate birth will be printed on Aadhaar card)													
(d) Email: (e) Mobile nu															
4	Basis of enrolmer	nt/update: 🗌	Document	verifi	cation OR	Con	firmation	by Head(s	of F	amily	{Ho	F(s)	1}		
5	For document-based enrolment/update, additional demographic information and documents presented:														
	(Address information should be filled only in case of enrolment or update of address) (a) Address: Care of (optional):														
	House no. / Buildi		Street: Ward no.:												
	Landmark:	Area/Locality/Sector:													
	Village/Town/City: Post Office				(mandatory): PIN code (mandato										
	Sub-district:		District:	State:											
	(b) Type of documents presented:			(i) Pr	oof of Ide	ntity (PO	I):								
	(See "List of acce documents" displ	(ii) P	roof of Ac	dress (Po	DA):										
	UIDAI and enroli	•	ie oj	(iii) Proof of Date of Birth (PDB) (optional):											
6	For HoF-based e	nrolment or u	ipdate of de	mogr	aphic info	rmation	, addition	al inform	ation	and d	ocui	men	ts pr	esent	ed:
	(a) Details of Hol	F: (i) Name	e:				Aa	dhaar no.:							
	(ii) Relationship w	vith the child:	Moth	er 🗌	Father	Lega	l guardian	L							
(b) Type of Proof of Relationship (POR) document presented:															
	(See "List of acceptable supporting documents" displayed on the website of UIDAI and enrolment centres)														
	I confirm the identity of the child named above and that she/he is related to me as mentioned. I hereby consent that the address recorded against my Aadhaar number may be recorded as the address against the Aadhaar number of the child and that my biometric information may be used to establish my identity. Signature of HoF:											ddress			
												ny			
7	7 For update, additional information: (a) Aadhaar number of the child: (b) Information to be updated: Biometric (photo, fingerprints and irises) Name Date of Birth														
	Gender	Address	Mob		Emai			POI and I				01.2			
Declaration															
1. I hereby confirm and declare that—															
(a) all the information and documents submitted is correct to the best of my knowledge and belief;															
(b) I and the child are entitled to the documents/information evidencing proofs cited above; and															
((c) the child is a resident of India (resided in India for 182 days or more in 12 months immediately preceding my enrolment														
	application) OR that the child is a Non-Resident Indian (valid Indian passport holding citizen who is not resident of India).													ndia).	
2. I understand that if the above declaration is found to be incorrect, the Aadhaar number of the child may be deactivated and, in														and, in	
addition, action may be taken against me as per law.															
3. I understand that the above information may be used, disclosed or shared in accordance with the Aadhaar (Targeted Delivery of														very of	
Financial and Other Subsidies, Benefits and Services) Act, 2016 and regulations made thereunder.															
4. I hereby give my consent for electronically obtaining information evidencing proof of identity, address, birth and/or relationship															
from the databases of the authorities dealing with the preparation or maintenance of such information and for sharing the above															
	ormation and docu	ments with go					thority, fo	or the purp	ose of	verif	catio	on.			
Sig	Signature of verifier: Signature / thumb impression														
					ather or lav	vful guar	dian:								
Na	me of verifier:		Name	of sig	natory:		Date	and t	ıme:						