



APPLICATION FOR IMMIGRATION
LAND AND ENVIRONMENTAL SERVICES – PUBLIC HEALTH GROUP

PLEASE COMPLETE IN BLOCK CAPITALS

Sponsor's Name: _____

Full U.K. Address: _____

Post Code: _____

Tel. Nos: House: _____

 Mobile: _____

 Work: _____

Name(s) of person(s) wishing to enter U.K.

Proposed U.K. address (if not given above)

Post Code: _____

Note: Cheques to be made payable to Glasgow City Council, and returned to
 PO Box 25068, Glasgow G1 1ZE.

ADMINISTRATION USE ONLY

NON REFUNDABLE CHARGE - £110.40

COPY OF RECEIPT ATTACHED YES/NO

WHEN COMPLETED FORWARD TO PUBLIC HEALTH