



APPLICATION FOR IMMIGRATION

NEIGHBOURHOODS REGENERATION AND SUSTAINABILITY– 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.

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

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Post Code:

Note: Cheques to be made payable to Glasgow City Council, and returned to
Eastgate, 727 London Road G40 3AQ

ADMINISTRATION USE ONLY

NON REFUNDABLE CHARGE - £148

COPY OF RECEIPT ATTACHED YES/NO

WHEN COMPLETED FORWARD TO PUBLIC HEALTH