



APPLICATION FOR IMMIGRATION

Neighbourhoods 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.

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

Post Code: _____

**Note: Cheques to be made payable to Glasgow City Council, and returned to
45 John Street G1 1JE**

ADMINISTRATION USE ONLY

NON REFUNDABLE CHARGE - £123.00

COPY OF RECEIPT ATTACHED YES/NO

WHEN COMPLETED FORWARD TO PUBLIC HEALTH