

Immigration Check Form	
Applicant Full Name	
Application ID	
Course or Centre Applied for	

Please complete all fields below	
Q1: Have you had any visa refusal(s) in ANY countries during the past 10 years?	YES <input type="checkbox"/> NO <input type="checkbox"/> <i>If YES, please provide full details in Section A below and send us copies of all refusal letters</i>
Q2: Have you previously held a study visa in the UK?	YES <input type="checkbox"/> NO <input type="checkbox"/> <i>If YES, please provide full details in Section B below and send us copies of all study visas and CAS/COE letters</i>

Section A: Previous visa refusal(s), please provide full details below		
Country (refusal from)	Date of Refusal	Visa Type

Section B: Previous study visa(s) in UK, provide full details below (for each visas)			
Visa Type		Institution	
Start Date		Are you currently studying in the UK?	YES <input type="checkbox"/> NO <input type="checkbox"/>
End Date		Have you successfully completed the course?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If NO, did not complete the course, please state the reason in the box provided below			
If YES, if intend to <u>repeat same level or lower-level qualification</u>, please state the reason below			
Visa Type		Institution	
Start Date		Are you currently studying in the UK?	YES <input type="checkbox"/> NO <input type="checkbox"/>
End Date		Have you successfully completed the course?	YES <input type="checkbox"/> NO <input type="checkbox"/>
If NO, did not complete the course, please state the reason in the box provided below			

By signing below, I confirm that the information I have provided in this form is accurate and complete to the best of my knowledge. I understand that failure to disclose or declare accurate information may result in the rejection of my application, withdrawal of any offer, or termination of my enrolment.

I also acknowledge that in such cases, any deposit I have paid will not be refunded

Applicant Signature: _____

Date: _____