

UK VISA INFORMATION FORM

UK visa application center address: PROFİLO ALIŞVERİŞ MERKEZİ Gülbahar, Cemal Sahir Sokağı
No:33, 34394 Şişli/İstanbul

You must fill out the Visa Information Form completely. Your appointment procedures regarding incompletely filled visa forms will not be completed and you will be fully responsible.

Tick the desired visa period. When choosing the visa duration, it gradually increases according to the duration of the visa in your passport before (6 MONTHS / 2 YEARS / 5 YEARS / 10 YEARS). The Consulate works with an appointment system. The processing time is concluded within 15-20 working days as of the day it is processed.

PERSONAL INFORMATION

FIRST NAME:

LAST NAME:

E-MAIL:

MOBILE PHONE:

OFFICE PHONE:

PASSPORT NUMBER:

DATE OF BIRTH:

GENDER:

TRAVEL HISTORY:

NATIONALITY:

DO YOU HAVE OTHER NATIONALITY?

PURPOSE OF TRAVEL (COMMERCIAL / TOURIST / FAMILY VISIT)

REQUESTED VISA DURATION

6 MONTHS 2 YEARS 5 YEARS 10 YEARS

PLACE OF BIRTH STATED ON YOUR PASSPORT:

DO YOU HAVE A PASSPORT WITH OTHER NATIONALITY:

PASSPORT ISSUING AUTHORITY (PASS. AS WRITTEN)

RECEPTION DATE:

FINISH DATE :

COUNTRY YOU ARE AT:

ARE YOU A CITIZEN OF THE COUNTRY YOU APPLY TO:

IS THIS YOUR FIRST PASSPORT: / EXPLAIN IF YOU HAVE OLD PASSPORTS

PASSPORT NUMBER ISSUING AUTHORITY RECEIPT DATE FINISH DATE PASSPORT STATUS (LOSS-IN YOUR HAND)

DO YOU TRAVEL TOGETHER:

NATIONAL SURNAME NAME DATE OF BIRTH IS THERE A VALID VISA?

HOW MANY DAYS DO YOU PLAN TO STAY IN ENGLAND:

ADDRESS TO STAY:

POST CODE:

PHONE:

E-MAIL

ADDRESS INFORMATION:

RESIDENCE ADDRESS:

ZIP CODE:

MOBILE PHONE:

E-MAIL ADDRESS:

HOW LONG HAVE YOU LIVED AT THIS ADDRESS?

VISA INFORMATION

HAVE YOU GOT A ENGLAND VISA IN 10 YEARS?

VISA TOUR: START DATE: FINISH DATE: ISSUING AUTHORITY:

HAVE YOU TRAVEL TO ENGLAND IN 10 YEARS?

DATE OF DEPARTURE (DAY / MONTH / YEAR) DATE OF RETURN (DAY / MONTH / YEAR) PURPOSE OF TRAVEL

DID YOU APPLY FOR ENGLAND HOME OFFICE?

I HAVE BEEN DENIED ENTRY TO ENGLAND IN 10 YEARS

VISA FROM ANY COUNTRY WITHIN 10 YEARS

REJECTED (VIA TYPE-DATE-REASON)

IN 10 YEARS, HAVE YOU BEEN OUT OF THE COUNTRY YOU HAVE BEEN EXCEPT FOR THE ENGLAND?

DATE OF DEPARTURE (DAY / MONTH / YEAR) COUNTRY OF TRAVEL PURPOSE OF TRAVEL

DO YOU HAVE UNITED KINGDOM INSURANCE:

DO YOU HAVE A CRIMINAL CONDITION FROM ANY COUNTRY:

YOUR FOREIGN LANGUAGE TO CONTACT:

FAMILY INFORMATION

MARITAL STATUS:

WILL YOUR WIFE TRAVEL WITH YOU:

PASSPORT NUMBER:

NATIONALITY:

SURNAME / NAME OF YOUR WIFE:

DATE OF BIRTH:

YOUR WIFE LIVES WITH YOU:

NATIONALITY OF YOUR FATHER:

SURNAME / NAME:

DATE OF BIRTH:

PLACE OF BIRTH:

NATIONALITY OF YOUR MOTHER:

SURNAME / NAME:

DATE OF BIRTH :

PLACE OF BIRTH:

DO YOU HAVE ANY CHILDREN WITH RESPONSIBILITY:

PASSPORT NO NATIONAL SURNAME NAME DATE OF BIRTH PLACE OF BIRTH

IF THE ADDRESS WHERE YOUR CHILD LIFE IS DIFFERENT FROM YOURS (ADDRESS AND TEL)

WILL YOUR CHILDREN TRAVEL WITH YOU?

EMPLOYMENT AND INCOME

HAVE YOU WORKED IN ARMED FORCES –GOVERNMENT – JUDICIARY – MEDIA – PUBLIC (POLICE AND PRIVATE SECURITY ETC) INSTITUTIONS?

NAME OF INSTITUTION: YOUR POSITION: STARTING DATE: ENDING DATE:

YOUR MONTHLY NET SALARY / AMOUNT DISPLAYED IN THE SALARY STUDENT

NAME OF THE INSTITUTION WHERE YOU WORK OR EDUCATE:

YOUR POSITION IN THE COMPANY:

ADDRESS:

PHONE:

POST CODE:

SGK EMPLOYMENT DATE: (AS SHOWN AT EMPLOYMENT)

THE RENTAL CONTRACT YOU CAN OFFER TO THE CONSULATE, HOW MUCH INCOME DO YOU PROVIDE, IF THERE IS

HOW MUCH OF YOUR MONTHLY INCOME DO YOU USE FOR YOUR LIVING EXPENSES?

HOW MUCH OF YOUR MONTHLY INCOME DO YOU SPEND TO YOUR FAMILY?

HOW MUCH WILL THE TRAVEL COST?

THE AMOUNT OF THE BANK ACCOUNT YOU PROVIDE TO THE CONSULATE FOR THIS TRIP

WHAT DOES A FLIGHT-SHIP TICKET COST?

WHAT IS THE ACCOMMODATION COST?

WHAT DOES YOUR LIVING EXPENSES COST?

HAVE YOU SEEN MEDICAL TREATMENT IN THE UK BEFORE?

DO YOU HAVE ADDITIONAL INFORMATION YOU WANT TO ADD?

DO YOU CONSIDER WORKING IN THE UNITED KINGDOM?

ARE YOU CONSIDERING STUDY IN THE UNITED KINGDOM?

RELATIVE INFORMATION

DO YOU HAVE RELATIVES IN ENGLAND?

WILL YOU VISIT HER

THE DEGREE OF PROXIMITY

NAME AND SURNAME:

PASSPORT NUMBER:

ADDRESS:

REGULATION

PHONE NUMBER:

E MAIL ADDRESS:

FOR COMMERCIAL TRAVEL

SURNAME / NAME OF THE INVITING PERSON

INVITE COMPANY NAME:

ADDRESS:

TELEPHONE: