

Please complete the following form in full

Student number	01273400		
Surname	ALAMINA		
First name	IYALLA JOHN		
Email address (not your student email)	john.alamin@gmail.com		
Date of birth	05	11	79
Type of visa	TIER 4		
Course title	DGCHE		
School (e.g. Business)	EDUCATION		
Start date of course (month and year)	09	20	
End date of course (month and year)	09	21	
Are you repeating part of the year?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Who is responsible for paying your fees?	<input checked="" type="checkbox"/> YOURSELF <input type="checkbox"/> FAMILY MEMBER <input type="checkbox"/> EMPLOYER		
<input type="checkbox"/> OFFICIAL SPONSOR	<input type="checkbox"/> OTHER (please state):		
If not yourself, are you submitting bank statements for the person/company paying your fees?			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
What are your fees for this academic year? £	4,832.00		
How much have you already paid? £	2,416		
How much are you wanting to pay late? £	2,416		
By which date can you pay the full amount?	31	08	21
How many bank accounts do you hold in the UK?	2		
How many bank accounts do you hold outside the UK?	1		
Have you submitted copies of all these accounts for the last three months?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Whose bank account did you use to apply for your visa?	MINE (uk accounts)		
Have you submitted copies of the account used to apply for your visa?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Are you working while you are in the UK?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
If so, what is your weekly salary? £	350		