



UMI U004895266

Tracking sheet

Visit date: 30 Jan 2020

Client personal details

Family name: **MITTAL**
 Given names: **KUNAL**
 Gender: **MALE**
 Date of birth: **06 Jun 1994**
 Country of birth: **INDIA**

Client identity details

Identity document presented:
 Identity document number:
 Issuing country:
 Date of issue:
 Date of expiry:
 Source:

Original Passport
S5212868
INDIA
28 Aug 2018
27 Aug 2028
Clinic

Client visa details

IME: **Non EDE**
 Upfront medical type: **Student**

Examinations required for this visa application

Exam	Status	Clinic
501 Medical Examination	Required	
502 Chest X-ray Examination	Required	
707 HIV test	Referred	Satguru Partap Singh (SPS) Hospital
712 Syphilis Test (VDRL or RPR)	Referred	Satguru Partap Singh (SPS) Hospital

30 JAN 2020

Handwritten signature

