

For the attention of the UK immigration authorities

Letter of consent to travel

Student / Child details

Student name:
Date of birth:
Age:
Gender:
Passport number:

School address & telephone numbers

UKLC – UNIVERSITY OF CHESTER
PARKGATE ROAD, CHESTER, CH1 4BJ
Telephone Nr: +44 1244 511000
<https://uklc.org/>

Course & transfer details

Course dates: From 30/06/2024 to 14/07/2024
Course type: ENGLISH LANGUAGE COURSE
Arrival date: 30/06/2024 Departure date: 14/07/2024
Departure airport: CATANIA Arrival airport: MANCHESTER

Parental, legal guardian details

Full name:
Address:
Mobile telephone number (including area code):
Landline telephone number (including area code):

Passport/I.D. number of parent or guardian:

Declaration & consent

I/we as the parent/s or guardian/s give consent for my child as named above to travel to Chester, United Kingdom, to attend a course at UKLC, Chester, UK as per the dates above.

Name of parent or guardian: Name of parent or guardian:

Signature of parent or guardian: Signature of parent or guardian:

Date: Date:

Please enclose copy of passport/I.D