

VISA WORLD

627 WATFORD WAY • LONDON • NW7 3JN
 info@visaworld.co.uk Fax: 020 8959 2888
 www.visaworld.co.uk ☎ 020 8959 6161

CONSULAR SERVICES

PASSPORT AND VISA
 PROCESSING AGENTS

Help us to help you ~ send this completed form - to tell us what we need to tell you.

If known, failure to quote Job Ref. **will** cause delay

To: **VISA WORLD**
627 Watford Way
London
NW7 3JN

or Fax with card details
 to 020 8959 2888

Order from: PLEASE PRINT CLEARLY

Mr/Mrs/Miss/Ms

Company

Address

Postcode

Tel: Daytime

Evening

Please process the following applications and plan for time in embassy as ticked:-

Normal ; Express** ; Same Day** ; **if available, extra costs will apply. Special**
 Ded Crr**

Name of Traveller	Nationality *	Passport applicatn ✓	Visa application Country to visit	Date of Entry	Length of stay (days)	Tourist Visa ✓	Business Visa ✓	Other Visa state classification	Entries required		
									Sgls ✓	Dble **✓	Mtple **✓

↓

* If not British or EC, please advise entry status into UK:

ILTR ; Six month visitor ;
 Other from _____ until _____

Date of Travel

_____ am
 _____ pm

If you will require your passport **before this date of travel**, please enter below the earlier date you are leaving the UK.

_____ am
 _____ pm

As requirements vary for different needs, we cannot answer telephone enquiries until we have these brief order details. We will then be able to give advice and information. If we have a query on your application, **we will contact you**. If we cannot process your application, **no charge will be made**.

- I enclose a self-addressed envelope to confirm correct return address **same as above** / **different to above**
- Application/s enclosed. <<-- ((or)) -->> Please send Form/s and a List of Requirements.

Please Invoice (account customers only)

Total enclosed £ _____ payable to "Visa World".
 For new customers and to avoid any delay for cheque clearing purposes or a difference in the expected embassy fee, we recommend that you quote your card details below.
 No charges will be made other than if needed for these purposes.

Please charge my: Visa MasterCard Maestro
 Delta Solo JCB Issue No. _____ Amex
 Card No. _____
 SRC No. _____ Valid from ____ / ____ Expires end ____ / ____

If a visa is not required we will retain our standard research fee and refund the balance.
 This fee will not be charged if another application is processed.

Dispatch Instructions ✓

Royal Mail Special Delivery	Next day by 1 pm	Next day by 9 am**	+ Sat Del **
+ Royal Mail Consequential Loss. Have you added the extra cost?			
Collection from our shop. No dispatch charges.			
DHL, FedEx, etc, Bike or Cab. Please advise details.			
'Meet & Greet' Please send rendezvous details.			
Other - please advise			

We are the only service that **saves you money** by **reducing charges** for additional travellers with unique discounts of up to **75% off**.
 Passport Office and Embassy fees are extra and charged at cost.

V20 WWW (22-250108)
 Shop & Office Hours: Monday to Friday – 9.00am to 5.30pm
 Out of hours collections & deliveries can be accommodated by arrangement
All transactions (information, advice, service, performance, fees & charges) are subject to Visa World Terms & Conditions of Trade (available on request)
 Located in shop premises at the **Apex Corner** (Northway Circus) roundabout-junction of the **A1 & A41** Buses: 113, 186, 614 & 797 stop outside and 292 nearby
 Free unrestricted on-street parking plus our own free car park for visitors at rear
 Motorway Exits: **M1** southbound J4; **M25** clockwise J19 or anticlockwise J23
Service is our business
 Orders received by 4.30pm will normally secure next day lodgement
 Same day lodgements are always available by arrangement
Underground: Hendon Central [Zone 3] + bus 113, 186 or 797
National Rail: Mill Hill Broadway (Thameslink) + 10 min walk or cab
If you're not satisfied, we're not satisfied

High Commission for the People's Republic of Bangladesh

28 Queens Gate, London SW7 5JA

Telephone: 020 7584 0081 - Fax: 020 7581 7477 / 020 7584 4551 - Website: Bangladeshhighcommission.org.uk

Bangladesh Visa Application Form

PLEASE TYPE/PRINT YOUR ANSWERS IN THE SPACE PROVIDED BELOW EACH ITEM (use BLOCK letters)				
01. FULL NAME (First/Middle/Family Name)		Staple 3 x copies photo (37mm x 37mm)		
02. PLACE OF BIRTH (City/State/ Country)	03. DATE OF BIRTH (dd/mm/yyyy) ____/____/____			
04. NATIONALITY	05. SEX <input type="checkbox"/> Male <input type="checkbox"/> Female			06. MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
07. PROFESSION	08. TYPE OF VISA			
09. PASSPORT NUMBER	10. PLACE OF ISSUE	11. DATE OF EXPIRY ____/____/20____		
12. SPOUSE'S NAME	NATIONALITY:			
13. FATHER'S NAME	NATIONALITY:			
14. MOTHER'S NAME	NATIONALITY:			
15. HOME ADDRESS				
16. TELEPHONE:	17. FAX:	18. E-MAIL		
19. BUSINESS/WORK ADDRESS				
20. TELEPHONE:	21. FAX:	22. E-MAIL		
23. NAME OF EMPLOYER				
24. TELEPHONE:	25. FAX:	26. E-MAIL		
27. PURPOSE OF VISIT (Please tick appropriate box)				
<input type="checkbox"/> Tourism (Inc. tablig/visiting relatives, etc)	<input type="checkbox"/> Business/Investment	<input type="checkbox"/> Seminar/Conference/Govt. Delegation		
<input type="checkbox"/> Cultural/Scientific Programme	<input type="checkbox"/> Missionary	<input type="checkbox"/> NGO Works <input type="checkbox"/> Official		
<input type="checkbox"/> Expert(s)/Worker(s)/Teacher(s)/Representative(s) in industrial/Educational/Trading Org. / Sports/Artistic activities etc.				
<input type="checkbox"/> Govt. contractual employment	<input type="checkbox"/> Study / Research	<input type="checkbox"/> Employment in UN/International Org.		
<input type="checkbox"/> Journalist / Media (Print & Electronic)	<input type="checkbox"/> Others (Please Specify)			
28. NAME AND ADDRESS OF PERSON(S), INSTITUTION OR COMPANY WHERE YOU CAN BE CONTACTED				
29. ADDRESS WHILE IN BANGLADESH		30. TELEPHONE		
31. PLACE AND PROBABLE DATE OF ARRIVAL		32. INTENDED DURATION OF STAY		
33. HAVE YOU EVER BEEN TO BANGLADESH <input type="checkbox"/> Yes <input type="checkbox"/> No		34. IF YES, DATE AND LENGTH OF LAST VISIT		
35. NAME AND RELATIONSHIP OF PERSON(S), TRAVELLING WITH YOU				
36. DECLARATION I Declare that the above information is true and accurate NAME _____ DATE ____/____/____ SIGNATURE _____				
Please ensure that you have answered Items I through 35 and signed the Declaration. Incomplete forms will be returned.				