



## Application for Visa Support Letter

Student Number \_\_\_\_\_

FULL TIME

PART TIME

Name & Surname \_\_\_\_\_

Email Address \_\_\_\_\_

Passport No \_\_\_\_\_ Nationality \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Male ♂  Female ♀

Embassy Address \_\_\_\_\_

Your expected date of arrival in Malta is on \_\_\_\_\_

Duration of Visit \_\_\_\_\_ Purpose of Visit \_\_\_\_\_

Place of Stay in Malta \_\_\_\_\_

Name of: Course /Conference/Other \_\_\_\_\_

\_\_\_\_\_ Start date \_\_\_\_\_

Additional Info/Remarks \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_