

KINGSTON COLLEGE OF LONDON

WHERE THE FUTURE BEGINS...

Student Request Form

Name:	Student ID:
Address: _____	Course :
	Postcode:
Email :	Tel No :

Please tick the required letter:

- | | |
|---|--|
| <input type="checkbox"/> Council Tax Exemption Letter | <input type="checkbox"/> NHS/GP Letter |
| <input type="checkbox"/> National Insurance Letter | <input type="checkbox"/> Bank Letter (of the bank below) |
| <input type="checkbox"/> Dependant /Spouse Letter | <input type="checkbox"/> Other (Please Specify) _____ |

Overseas Address: _____ Spouse Full Name: _____

_____ DOB: _____

_____ Passport No: _____

Holiday Request

Reason/Destination: _____

From: _____ To: _____

Change of Circumstances

Change of Address

Old Address: _____ New Address: _____

Change of Contact No.

Previous No. : _____ New No. : _____

Change of Email Address

Previous Email: _____ New Email: _____

Change of Next to Kin

Previous Next to Kin: _____ New Next to Kin: _____

Student Signature: _____ **Date:** _____

Please send the completed form to Hand over to
The Admission Department
KINGSTON COLLEGE OF LONDON
Health Aid House
Marlborough Hill
Harrow HA1 1UD

Office Use Only :

Received By: _____

Date Enter By: _____

Date: _____