

NEW VISA APPLICATION

NOTE: Please complete the form in CAPITAL letters and return to the Registrar's Office or e-mail to studentvisa@uowdubai.ac.ae or fax to +971 4 3672753.

Family Name:	
Given Name/s:	
Title:	<input type="checkbox"/> Mr <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Dr
Student Number:	
Nationality:	
City and Country of birth:	
Date of birth:	
E-mail:	
Program:	<input type="checkbox"/> UG <input type="checkbox"/> PG <input type="checkbox"/> CLC <input type="checkbox"/> PI

Passport Number:	
Date of Issue:	
Date of Expiry:	
Current Visa Status if in UAE:	<input type="checkbox"/> Visit Visa <input type="checkbox"/> Tourist/Service
If not on UOWD visa, name of current sponsor (if applicable):	
Visa Number:	
Date of Issue:	
Date of Expiry:	

UAE Physical Address:	Overseas Address:
Apartment No.	Apartment No.
Building:	Building:
Area:	Area:
Emirate:	City:
P.O. Box No:	Postal code:
Home No:	Mobile No:
Mobile No:	Home No:
Mobile 2 No:	Country:

In case of emergency, please contact:

Name: _____

Relation: (e.g. mother, friend) _____

Contact Number: Country code _____ Area code _____ Number _____

Is there any medical information that should be brought to the attention of the University?

If yes, kindly state below:

--

Types of visa: **Student Visa (1 year)** **Long-term visit visa** **Short-term visit visa**

Documents required:

- Clear Passport copy (with 6 months validity)
- 5 passport size photos
- Receipt for visa and tuition fees
- Copy of current visa (if you are inside the UAE)
- Copy of offer of admission letter

***Visa Cost Category** (Fees quoted are in UAE Dirhams and are subject to change):

<input type="checkbox"/> Inside UAE on a tourist/service visa	
Administration Cost	1000
Entry Permit	1040
Medicals	260
Amendment	N/A
Stamping	450
Cancellation (Inside)	200
*Health Insurance	1075
Expenses Total (Non-Refundable)	4025
Visa Deposit (Refundable)	2500
Grand Total	6525

<input type="checkbox"/> Inside UAE on a short-term/long-term/on arrival visa	
Administration Cost	1000
Entry Permit	1040
Medicals	260
Amendment	720
Stamping	450
Cancellation (Inside)	200
*Health Insurance	1075
Expenses Total (Non-Refundable)	4745
Visa Deposit (Refundable)	2500
Grand Total	7245

<input type="checkbox"/> Outside UAE	
Administration Cost	1000
Entry Permit	520
Medicals	260
Amendment	N/A
Stamping	450
Cancellation (Inside)	200
*Health Insurance	1075
Expenses Total (Non-Refundable)	3505
Visa Deposit (Refundable)	2500
Grand Total	6005

***Health insurance is not required if you hold private health insurance which is valid for a minimum of 6 months and has UAE coverage. In such cases, a copy of the card and contract needs to be provided when submitting this form.**

You can apply for a visit visa if you would like to attend the graduation ceremony or any short course offered by the University.

- DHS1050 - Short-term visit visa (valid for 30 days or less; Health insurance is not included)
- DHS 2050 - Long-term visit visa (valid for 90 days or less; Health insurance is not included)

Terms & Conditions:

- Students under UOWD visa sponsorship must be enrolled in a minimum – 3 undergraduate (UG) and 2 postgraduate (PG) subjects in autumn and spring semesters. CLC students must pay for at least 2 terms. Violation of the Visa Policy will lead to cancellation of your visa.
- Summer semester is optional for UG and PG students unless it is your first semester. If you wish to take a break from studies, you must submit a Leave of Application form to the Registrar’s department (UG and PG) and CLC students can take an approved Leave of Absence once 2 terms have been completed and an additional term fees, has been paid for.
- Visa applications are subject to approval of the UAE Immigration Department and passing the required medical tests. In case of the application being rejected, you will have to bear the costs incurred.

By signing this form, you agree that you have read and will abide by the University's Student Visa Sponsorship Policy (PP-REG-DB-1.1)

Student Signature: _____ Date: _____