

OUR REF : AUH/

**NOTICE OF WITHDRAWAL OF APPLICATION**

TO : The Entry Clearance Officer,

APPLICANT'S FULL NAME :

.....

.....

DATE OF BIRTH :

.....

.....

.....

PASSPORT NUMBER

.....

.....

.....

I/We the applicant (s) named above wish to withdraw the application (s)  
Which I/We have made for Entry Clearance.

SIGNATURE OF THE APPLICANT :

.....

.....

DATE :

**VISA FEES ARE NOT REFUNDABLE.**