

AGENT AUTHORISATION FORM

I am requesting that a Queen Mary agent/representative provides me with counselling/advice regarding my application/visa (delete as appropriate).

First name	Najla
Surname	Alsaadon
Queen Mary application ID number	UCAS ID: 16795499405
Programme applied for	Graduate-entry medicine (A101)
Nationality	Saudi
Proposed agent/representative email address	UKuni - Riyadh - KSA - tsaeed@ukuni.org
Proposed agent postal address	King Abdulla Branch Road, Mughrazat, Riyadh
Reasons for representation	To follow up my application and get my offer letter and then help me with my visa application.

Please note: Students studying with one the following pathway providers are not permitted to use agents for their Queen Mary applications. Please consult your study centre for further advice

- Bellerbys
- David Game College
- Kaplan

- INTO
- NCUK
- OnCampus

Upon receipt of the agent/representative authorisation form, I authorise the above named agent to act on my behalf for all matters that concern my application to Queen Mary. All future correspondence concerning my application will be sent to the named agent/representative.

THIS FORM MUST BE EMAILED TO: GLOBALENGAGEMENT@QMUL.AC.UK

Signature:



Date: 11/11/2022