

The Travel Visa Company

Your Dedicated, Worldwide Travel Visa Agency



REFERRED BY

i.e. Travel Agent / Tour Operator / Cruise Line / Search Engine / Repeat Customer / Friend / Other

You **MUST** return this front page with your application.

RETURN ADDRESS

The Travel Visa Company Ltd.

Unit 2A, The Courtyard
Regents Park, London Road
Nantwich, Cheshire
CW5 6LW



SUPPORT

If you have any queries or would like additional assistance when completing your application, please contact us and one of our team would be happy to assist.



Telephone: **01270 904 907**



Email: **applications@thetravelvisacompany.co.uk**

Police Certificate (ACRO) Application Pack

Thank you for requesting an application pack for a Police Certificate (ACRO).

Please complete the following three sections and then return the application pack and all supporting documents to The Travel Visa Company Ltd.

1. Checklist of the documents required

2. Service and delivery options

3. Address and payment details

PLEASE NOTE


The Travel Visa Company do not issue your police certificate. This is undertaken by the ACRO Criminal Records Office and can take **UP TO 6 WEEKS** to process your application.

1. Checklist of the documents required

✓ Please tick to confirm you have provided the following:

- ☐ **ACRO APPLICATION FORM** – Please find attached. It is important to carefully read through all the questions and fully complete all forms in **BLOCK CAPITALS** with a **BLACK PEN**. All application forms **MUST** be printed single-sided. Application forms printed double-sided **WILL NOT** be accepted.
 - ☐ **+ £25.00 SUBJECT ACCESS REPORT** – Certain details will be stepped-down from an ACRO Certificate after a set period of time depending on the nature of the offence, the age of the subject when the offence was committed, and the sentence imposed. If these details are no longer present on the ACRO, then a Subject Access Report will be required. The Travel Visa Company can obtain this for you to ensure you have all documents required for your visa application.
- ☐ **COPY OF PASSPORT** – Please include a **colour** copy of the photograph page of your passport. Your passport must be valid for at least 6 months upon return to the UK.
- ☐ **PHOTOGRAPH(S)** – The photograph must be passport size, taken within the last 6 months, against a light background, printed on photographic paper, be full face and non-smiling [without sunglasses, a hat/cap or other head covering, unless the applicant wears such items because of their religious belief or ethnic background].

- ☐ **SIGNED LETTER OF AUTHORISATION** – Please ensure you complete and sign the letter of authorisation found at the back of the application form. Your ACRO application cannot be processed without this signed letter of authorisation.

 Failure to provide us with these documents will result in delays with your application.

2. Service and delivery options

✓ Please tick to confirm which service and delivery type you are requesting:

	Service Type	Processing Time	Document Fee	Service Fee	VAT	Total
<input type="checkbox"/>	Standard	15 days*	£55.00	£33.33	£6.67	£95.00

*Working days excluding postal days.

 Once we have submitted your application, the ACRO office will process your application. It can take **UP TO 6 WEEKS** for us to receive the issued certificate.

Continued overleaf...

Title: ☐ Mr ☐ Mrs ☐ Miss ☐ Ms Other:

Surname: As shown in passport

Given name(s): As shown in passport

Have you ever used or been known by any other name?

If yes Previous/former name(s):

Gender: ☐ Male ☐ Female ☐ Intersex

Date of birth: DD/MM/YYYY

Place of birth:

Town/City:

State/Province:

Country:

UK National Insurance Number:

UK Driving Licence Number:

Passport / Travel Document Details

Country you are travelling to:

Do you hold a current passport or travel document?

☐ Passport ☐ Travel Document ☐ None held

If yes Passport/Travel Document Number:

Nationality:

Expiry Date: DD/MM/YYYY

If no Do you possess any other official photographic identity document?

☐ Yes ☐ No

Please provide details / reason:

Do you hold an additional passport/travel document?

If yes

Passport/Travel Document Number:

Surname: As shown in document

Given name(s): As shown in document

Nationality:

Expiry Date: DD/MM/YYYY

Contact Details

Phone Number:

Email Address:

Current Address:

Street:

Town/City:

State/Province:

Postcode:

Country:

Date from: MM/YYYY

If you have lived at your current address for less than 10 years please give details for all previous addresses for this period.

Previous Address 1:

Street:

Town/City:

State/Province:

Postcode:

Country:

Date from: MM/YYYY

Date to: MM/YYYY

Previous Address 2:

Street:

Town/City:

State/Province:

Postcode:

Country:

Date from: MM/YYYY

Date to: MM/YYYY

If required, please use the 'Additional Details' section.

Personal History

Have you ever lived in Scotland? ☐ Yes ☐ No

Have you ever lived in Northern Ireland? ☐ Yes ☐ No

Are you a serving, ex-serving, dependant or ex-dependant, partner or ex-partner of a servicing or ex-servicing member of the UK armed forces or are you a civilian that has been subject to UK armed forces acts? ☐ Yes ☐ No

Are you the subject of outstanding criminal proceedings? ☐ Yes ☐ No

If yes

Alleged Offence(s) 1:

Date of Court Hearing:

 DD/MM/YYYY

Court:

Adjudication details:

Alleged Offence(s) 2:

Date of Court Hearing:

 DD/MM/YYYY

Court:

Adjudication details:

If required, please use the 'Additional Details' section.

Personal History (continued)

Please provide details of any times you have been arrested, cautioned, warned or reprimanded or been convicted of a criminal offence in England, Wales, N. Ireland or Scotland:

Offence(s) 1:

Date of Court Hearing:

 DD/MM/YYYY

Court:

Disposal/sentence details:

Offence(s) 2:

Date of Court Hearing:

 DD/MM/YYYY

Court:

Disposal/sentence details:

If required, please use the 'Additional Details' section.

Endorser Details

Your application must be endorsed by someone in one of the occupations listed on page 3 and cannot be your partner or family member, must have known you for a minimum of two years and must be eighteen years of age or older. They may be contacted to verify the authenticity of this application.

Title: ☐ Mr ☐ Mrs ☐ Miss ☐ Ms Other:

Surname:

Given name(s):

Occupation:

Relationship to you:

Phone Number:

Email Address:

In order to satisfy ACRO requirements, your application must be endorsed by an individual employed as one of the following or similar profession:

- | | |
|------------------------------------|---|
| - Accountant | - Magistrate |
| - Airline Pilot | - Manager |
| - Ambulance Service Official | - Medical Consultant/Specialist |
| - Architect | - Member of a Chartered Institute |
| - Bank / Building Society Official | - Member of Parliament |
| - Barrister | - Merchant Navy Officer |
| - Care Worker (Registered) | - Minister of a Recognised Religion |
| - Company Chairman | - Museum Curator |
| - Chemist | - Notary Public |
| - Chiropodist | - Nurse (SRN or other qualification) |
| - Civil Servant (Permanent) | - Officer of the Armed Services |
| - Commissioner of Oaths | - Optician |
| - Councillor (Local or County) | - Personal Licence Holders (Liquor/Alcohol) |
| - Dentist | - Personnel Officer |
| - Director | - Paramedic |
| - Doctor | - Pharmacist |
| - Engineer | - Police Officer/Police Civilian Staff |
| - Executive | - Post Office Official |
| - Financial Adviser | - Prison Officer |
| - Fire Service Official | - Probation Officer |
| - Funeral Director | - Salvation Army Officer |
| - Insurance Broker | - Social Worker Solicitor |
| - IT Specialist | - Surveyor |
| - Judge | - Teacher |
| - Justice of the Peace | - Trade Union Officer |
| - Lawyer | - Tutor |
| - Lecturer | - Valuer or Auctioneer |
| - Legal Secretary | - Veterinarian |
| | - Veterinary Nurse |

Additional Details

Additional Details (continued)

Please tick to confirm you have read, fully understood and agree to the following:

- ☐ I, the applicant, hereby certify that I have read, or have had read to me, all the questions and statements on this application and understand all the questions and statements on this application. The answers and information furnished in this application are true and correct to the best of my knowledge and belief.

Print name (BLOCK CAPITALS):

Date: DD/MM/YYYY

LETTER OF AUTHORISATION

Dear ACRO Criminal Records Office,

Please be advised that I, _____ authorise The Travel Visa Company Ltd to act on my behalf with regard to my ACRO application.

The Travel Visa Company can be contacted using the following details:

Telephone: 01270 904 907

Email address:

Address:

The Travel Visa Company Ltd.
Unit 2, The Courtyard
Regents Park
London Road
Nantwich
Cheshire
CW5 6LW

I would be very grateful if you could issue my ACRO Certificate as soon as possible as it is required for my visa application.

Yours sincerely

Name of applicant: _____

Signature: _____

Date: _____