



IMMIGRATION QUESTIONNAIRE

A. PRINCIPAL APPLICANT

Name:

Last Name

Names

Address: _____

City

State or Province

Country

Telephone No.: _____

Residence

Cell Phone

Work

Fax

Date of Birth: _____

Day

Month

Year

Place of Birth: _____

City

Country

Citizenship: _____

Sex: Male

Female

Marital Status:

Never Married Engaged Married Widowed Separated Divorced

Height

Weight

Swis Immigration

Details of Post Secondary Education (University or Technical), beginning with most recent:

Dates (Month and Year)	Name of the Institution	Diploma Obtained

Language Ability:

Mark with an "X" the corresponding box:

Language	Ability	Fluently	Functional	With Difficulty	No Ability
English	Speak				
	Read				
	Write				
	Comprehend				
French	Speak				
	Read				

	Write				
	Comprehend				

Your native language: _____

Swis Immigration

Work Experience

Beginning with your most current job.

Dates Month and Year From / To	Name of Employer	City and Country Of Employer	Position and description of employment

B. INFORMATION OF YOUR SPOUSE

Name:

Last Name

Names

Date of Birth: _____

Day

Month

Year

Swis Immigration

Your native language: _____

Children:

Name	Date of Birth	Sex F / M	Marital Status	Occupation	Travel to Canada?

Brother and Sister:

Name	Date of Birth	Sex F / M	Marital Status	Occupation	Present Address

C. RELATIVES IN CANADA

Relatives in Canada:

- Name:** _____
Last Name Names

Relationship: _____ **Occupation:** _____

Address: _____

Telephone Number: _____

D. PREVIOUS VISITS TO CANADA

Previously Visited Canada: Yes No

If you answered "Yes" to the above question, please answer the following:

Swis Immigration

When: _____

Where: _____

Employer in Canada:

Name: _____

Address: _____

Destination in Canada: _____
City Province

Previously Applied for Permanent Residence or Visitor Visa to Canada?

Permanent Residence: Yes No

Visitor Visa to Canada: Yes No

Note: The information expressed in this application will be dealt with strict confidentiality