

# *Prashant Ajmera & Associates*

## **Immigration to Canada under Quebec Immigration program: Form for client to provide information**

Please complete all sections of the form to do assessment;  
If you are married, spouse must also complete the form;

### **(1) Personal Identification:**

Surname		First name	
Any other name you used in past:			
Date of Birth	Place of Birth	Province/State	Country
Citizenship	Nationality /if applicable	Passport NO	

### **(2) Current Marital Status:**

<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Marriage void <input type="checkbox"/> Engaged <input type="checkbox"/> Separated <input type="checkbox"/> Divorced			
Date and Place of marriage		City	Country
Year	Month	Date	
Married More then Once? <input type="checkbox"/> Yes <input type="checkbox"/> No.			

### **(3) Permanent Address:**

Permanent address:			
Mailing address:			
Tel: (H)	Work	E-mail:	
Fax: (H)	Work		

### **(4) Dependent who will accompany you to Quebec:**

Surname	First name	Relationship to applicant	Date of Birth			City of Birth	Country
			Year	Mo	Day		

### **(5) Address of your wife and children if they are not living with you at present:**

Address	City	Country	Tel:	Fax:

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**(6) Education:**

Elementary	Number of years	Language of instruction	Post Secondary	Number of years	Language of instruction
Secondary	Number of years	Language of instruction	University	Number of years	Language of instruction

**(7) School Education:**

Laval	Elementary				Graduation				Post Secondary			
Duration	From		To		From		To		From		To	
	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month
Name of school												
Specialization												
Certificate obtained												

**(8) University Education:**

Laval	Undergraduate / Bachelor's				Graduation/Masters				Post Graduate / Ph.D.			
Duration	From		To		From		To		From		To	
	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month
Name of Institute												
Specialization												
Diploma/degree obtained												
Other study												

**(9) Work experience:**

Duration				Name and address of Employer	Position Held	Main Responsibility
From		To				
Year	Month	Year	Month			

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**(10) Language skill:**

French				English			
Comprehension							
Speaking							
Reading							
Writing							

What is your mother tongue? \_\_\_\_\_  
 Do you speak any other languages? If yes, Please specify \_\_\_\_\_

**(11) Are you member of any association:**

Duration				Name and address of association	Type of association	Position Held
From Year	From Month	From Year	From Month			

**(12) Have you applied for any of the following?**

Temporary residence status in Canada?  No  Yes. Province \_\_\_\_\_ Date \_\_\_\_\_  
 Application accepted  Application denied  Application denied

Immigration status in Canada or any other country?  No  Yes. Province \_\_\_\_\_ Date \_\_\_\_\_  
 Application accepted  Application denied  Application denied

**(13) (A) Are you Currently staying in Quebec?**  No  yes. If yes, since when \_\_\_\_\_

**(B) Please indicate reason and duration of your stay in Quebec.**

Dates

Tourism	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
Work	<input type="checkbox"/> No	<input type="checkbox"/> Yes	_____
Studies	<input type="checkbox"/> No	<input type="checkbox"/> Yes	_____
Refugee	<input type="checkbox"/> No	<input type="checkbox"/> Yes	_____
Business	<input type="checkbox"/> No	<input type="checkbox"/> Yes	_____
Other _____	<input type="checkbox"/> No	<input type="checkbox"/> Yes	_____

**(14) Your intended occupation in Quebec:** \_\_\_\_\_

**(15) Do you have job offer from a Quebec employer?**  No  Yes If, yes  in writing  Verbally

Name of employer	Address:	Tel:	Job offered
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<b>(16) Do you have any relatives in Quebec?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, Please give detail		
Name	Address	Relationship

<b>(17) What amount of money you can bring in to Quebec?</b> _____ CD\$
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**(18) Please give address of your last 10 years of residence:**

Duration				Address	City and state	Country
From Year	From Month	From Year	From Month			

<b>(19) Where will you settled in Quebec:</b>  _____
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**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_