Immigration Assessment Form	
Personal Information	
Full Name:	Date of Birth:
Sex: Male / Female	Contact Number:
Email:	Country of Residence:
Preferred Destination in Canada:	
Marital Status:	Do you have any children under the age of 19?
Single / Married / Common- Law	Yes / No
How many children do you have aged 13 to 18?	
Spouse/ Common- Law Information	
Full Name:	Date of Birth:
Highest Level of Spouse's education	
Level of Spouse's English Proficiency	
Level of Spouse's French proficiency	
Has your spouse worked inside of Canada within the last 10 years?	
How many years of full-time skilled work experience has your spouse obtained inside Canada within the last 10 years	
Has your spouse worked outside of Canada within the last 10 years?	
How many years of full-time skilled work experience has your spouse obtained outside Canada within the last 10 years	
Language Skills	
Please describe your proficiency in English and/or	French under each of the four skills listed below.

English (IELTS/ CLB)	Writing			Reading		Speaking			Liste	ening	
French (TEF/CLB)	Writing	ng Rea		Readin	ng		Speaking		Listening		
Your Education	and Tra	ining									
Please list all yo		ation ar	nd/or t	raining	other	than h	igh scho	ol (seco	ndary	schoo	ol), starting with
		D				D: 1		1.1.	1	•	
Type of Program Prog		Progra	gram Duration			Did you complete this program?			Location		
Work History											
Occupation Length o		of When			Work ho		hours Type o		f Job Lo		Location
								Payroll/ Self Employed			_
Management Experience											
During any two of the last five years:											
Do you have management experience? Have you owned a business?											

Yes / No	lo			Yes / No					
If the answer is yes, please provide the business details:									
Ownership Percentage	e: Nu	mber	of employ	/ees:	ency:				
Annual Sales:	An	nual N	Net Profit	after Tax:	Net Worth o	f Company:			
Did you own and man	age any other bus	siness	(es) during	g the last five ye	ears?				
Yes / No									
Family or Friends in C	anada								
Do you have a close fr	iend living in the	provir	nce of Mai	nitoba who is 18	3 years or olde	r?			
Yes / No									
Do you have any famil	ly members or rel	atives	s living in (Canada and who	are 18 years	or older?			
Yes / No									
If the answer is Yes									
Relationship	Residency Status	5		Living in		Since			
Your Personal Net Wo	orth								
Currency:				Amount:					
Other Information									
How did you hear abo	ut us?								
You may provide additional information that you think would be relevant to your immigration assessment. Would you like to add information at this time?									

Protection of Personal Information

The personal information appearing on this form, and in any documents that must be appended to it, is required for processing your application for Immigration to Canada or for a selection certificate and the application of the Act respecting immigration to Québec, the Regulation respecting the selection of foreign nationals, the Regulation respecting the immigration consultants and their administrative regulations.

Your personal information is confidential and may not be disclosed without your consent unless explicitly authorized by you.

Declaration

I declare that the information contained in this application and appended documents, if any, is complete and accurate and I will notify the representative of any change in answers given on this form before the submission of application to IRCC or to Minister of Immigration and Cultural Communities, Quebec, CANADA.

I acknowledge that I have read the notice on the protection of personal information in the section above.

I further acknowledge that by saving this document and sending the same to my legal representative electronically, constitute my consent to use the information and no physical signature is required.

For Office Use Only

Eligible: Yes / No

Comments:

PLEASE EMAIL THIS FORM BACK TO BESPOKE IMMIGRATION: Info@bimmi.ca