

<u>Please fill this form and send it to Balvinder Kumar (balvinder@bklaw.ca). We will contact you shortly.</u> In case of any questions, please call us at 905.290.7205 and we will be happy to assist you.

Skilled Worker Assessment

Complete the following form for a free assessment under skilled category

Name	:	<u>.</u>	
Email	:		
Nationality	:		
Complete Current living address	:	<u>.</u>	
Contact phone number	:	<u>.</u>	
Date of birth of the applicant	:		
Male or female	:		
Marital status-single/ married	:		
Name and Date of birth of the co applic	cant	:	
Male or female	:	<u>.</u>	
Marital status-single/married	:		
Education& work experience			
Applicant	:	<u>.</u>	
Co applicant	:	<u>.</u>	
Attach your and spouses Resul	me cover	ing following details	
Level of education (from high s of course)	chool to :	maximum level including years of passing and duration	
Chronological work experience (from-to):			



IMMIGRATION EVALUATION FORM

Field of study :	
Number of dependent children :	
Languages (Read, Write, Speak, Listen) :	
Any relative in Canada (specify the relationsh	ip and province in which the relative living)
:	<u>.</u>
Financial Information	
Net worth in Canadian Dollars:	
Medical background	
Of the applicant :	
Of the Co applicant/spouse :	
Of the dependent children :	
Criminal background	
Of the applicant :	
Of the Co applicant/spouse :	
Of the dependent children :	
Have you ever applied for Canadian Visa? :	
Have you ever visited Canada with duration? :	