



Tender Care Immigration Services Ltd.

410 - 620 View St. Victoria BC V8W 1J6

Office no. 1-778-432-2073

Fax no.: 1-778-432-2071

Email add: *tc.immigration@yahoo.ca*

IMMIGRATION BACKGROUND:

(Provide a background of your past and present employment. You can also provide further relevant details of your specific situation/request pertaining to any immigration category.)

PERSONAL BACKGROUND:

LAST NAME: _____ GIVEN NAME: _____

MARITAL STATUS: _____ AGE: _____

DATE OF BIRTH: _____ CITIZENSHIP: _____

CONTACT INFORMATION:

CONTACT NO.: _____ EMAIL ADDRESS.: _____

MAILING ADDRESS: _____

EDUCATION:

HIGHEST EDUCATIONAL ATTAINMENT: _____

PROOF OF LANGUAGE PROFICIENCY: _____

READING: _____ SPEAKING: _____ WRITING: _____ LISTENING: _____

WORK EXPERIENCE:

EMPLOYMENT DATE YYYY-MM-DD	POSITION	ADDRESS	COMPANY

SPOUSE/ PARTNER INFORMATION (if applicable)

IF MARRIED, IS YOUR SPOUSE COMING WITH YOU TO CANADA? _____

SPOUSE LAST NAME: _____ GIVEN NAME: _____

AGE: _____ EMAIL ADD: _____

SPOUSE EDUCATION:

HIGHEST EDUCATIONAL ATTAINMENT: _____

PROOF OF LANGUAGE PROFICIENCY: _____

Reading: _____ *Speaking:* _____ *Writing:* _____ *Listening:* _____

SPOUSE WORK EXPERIENCE:

EMPLOYMENT DATE YYYY-MM-DD	POSITION	ADDRESS	COMPANY