

Adgbenfash Consulting

Our Time, Your Time

IMMIGRATION ASSESSMENT FORM

Destination country (ies) that you wish to be assessed for - please tick (✓)

Australia New Zealand Canada USA
 Denmark Norway Singapore Other

Other (please specify).....

- ✓ Please complete this form by PRINTING or TYPING your answers in BLACK ink, in ENGLISH, in the boxes provided. You can "Save As" then send the completed form to us as an e-mail attachment.
- ✓ **Please send us the CV/Resume (in English) – for both partners/spouses (if applicable) - with this form.**
- ✓ Please DO NOT send us copies of your degrees/diplomas/certificates/references. (These will be requested later).
- ✓ If necessary, please attach no more than two pages of additional information.
- ✓ Please enclose PAYMENT and allow up to 10 working days for the completed report to be sent to you.

Important note:

This is not an official form, however it is important to provide us with all relevant information that will allow our officially-registered consultants to properly assess your immigration prospects.

Please be assured that all your personal information will be treated in the strictest confidence and will not be released to any outside party. It will be used only by Adgbenfash Consulting Limited for assessment and communication purposes.

YOUR PERSONAL DETAILS

Your Quick Check Number (from your Quick Check response e-mail): _____

	You	Your Partner/Spouse
Family Name		
First Names		
Title	Mr/ Mrs/ Ms/ Dr (circle as applicable)	Mr/ Mrs/ Ms/ Dr (circle as applicable)
Street Address		
City		
Postcode		
State/Province/County		
Country		
Postal Address (if different)		
City		
Postcode		
State/Province/County		
Country		
Home phone		
Mobile phone		
Email		
Fax		
Sex	Male / Female (circle as applicable)	Male / Female (circle as applicable)
Date of Birth		
City & Country of Birth		
Nationality		
Occupation		

	You	Your Partner/Spouse
Your current residence status (circle as applicable)	Citizen / Permanent Resident / On Temporary Visa	Citizen / Permanent Resident / On Temporary Visa
Other citizenships? (if applicable)		
Have you lived outside your current country of residence for any periods of 12 months or more?	Where?: Dates:	Where?: Dates:
Have you ever lived or worked in your destination country?	Dates: Details:	Dates: Details:
Have you ever visited your destination country?	Dates: Details:	Dates: Details:
Do you have a preferred city/region where you wish to settle?		

YOUR MARITAL STATUS

Are you? Single Married De Facto Same sex relationship
 Divorced Separated (living together) Widow(er) _____

If in a De Facto (common law) relationship, civil partnership or same-sex relationship when did you start living together?	(month/year)
And can you provide evidence of co-habitation at one address (eg. joint bank accounts, joint lease/mortgage agreements)?	Yes / No (circle as applicable)
Please give details of any time spent apart since this date (if longer than 4 weeks) and explain why:	(months)
If divorced, is the divorce legal and final?	Yes / No (circle as applicable)
Please indicate who has custody of children:	
If separated, do you plan to divorce and, if so, when?	

If applicable, list all the personal details of all your children (circle as applicable):

Name of child	Sex	Date of Birth (DD/MM/YY)	Living with you?	Emigrating with you?
	M / F		Yes / No	Yes / No
	M / F		Yes / No	Yes / No
	M / F		Yes / No	Yes / No
	M / F		Yes / No	Yes / No

If any of your dependant children are not emigrating with you, please indicate why not: _____

YOUR EDUCATIONAL HISTORY

Please give details of all your formal (government-accredited) degrees/diplomas/certificates of more than ONE YEAR study. For trades, please list completed qualifications or apprenticeships. For supervised industry training, please list the number of years of training completed (include the number of days worked / studied per week). **IMPORTANT:** Please state if any of these qualifications are incomplete/unfinished.

Start date (month/year)	End/graduation date (month/year)	Full name of Institution (indicate city, country & website)	Name of Obtained Qualifications	Length of Course (years; full-time/part-time?)

Official qualification certificates available? Yes / No (circle as applicable)

YOUR PARTNER'S EMPLOYMENT HISTORY

Please list the details of your work history. List any gaps in employment.

Start date (month/year)	End date (month/year)	Employers name - (indicate city, country & website)	Position held	Nature of Work (Main Duties)	Total Period (full-time/part-time?)

Written work references or other evidence covering your work history available?	Yes / No (circle as applicable)
If no, please explain the type of proof available?	

YOUR FINANCIAL STATUS (Both Partners Combined, if applicable)

Please indicate the approximate value of your (and your partner's) current assets and liabilities.

	Currency	Amount
Property equity (value less mortgage)		
Value of cars & vehicles (value less finance)		
Valuables (i.e. Jewellery, Gold, Antiques, etc)		
Savings / Bank deposits / Cash		
Value of shares in a business (deduct debts)		
Stocks / Share / investments (exclude pensions)		
Other (please specify)		
Deduct any outstanding debts / liabilities		
Total Net Worth		

	(Circle as applicable)
Are you expecting any additional payments within the next 2 years: (eg. pension, inheritances, redundancy payments)	Yes / No
If yes, please specify when, and from where?	
Do you?... Own your own home / Rent / Live with parents / Other (Circle as applicable) If other, please specify:	
Do you own a business?	Yes / No
If so, please indicate: No of employees _____ / Annual Turnover _____ / Your % share of ownership _____	
Are you a senior executive of a company (but not a shareholder)? If your answer is yes to either question, please complete this section:	Yes / No
If being assessed for the UK, please state your gross earnings over a 12 month period during the last 15 months.	

LANGUAGES	You	Your Partner / Spouse
Is English your mother tongue? (Circle as applicable)	Yes / No If No, please specify your level of English ability ;- Reading: Fluent/With Difficulty/Non-existent Writing: Fluent/With Difficulty/ Non-existent Speaking: Fluent/With Difficulty/ Non-existent	Yes / No If No, please specify your level of English ability ;- Reading: Fluent/With Difficulty/Non-existent Writing: Fluent/With Difficulty/ Non-existent Speaking: Fluent/With Difficulty/ Non-existent
For immigration to Canada; (Circle as applicable)	Please specify your level of French ability ; Reading: Fluent/With Difficulty/Non-existent Writing: Fluent/With Difficulty/ Non-existent Speaking: Fluent/With Difficulty/ Non-existent	Please specify your level of French ability ; Reading: Fluent/With Difficulty/Non-existent Writing: Fluent/With Difficulty/ Non-existent Speaking: Fluent/With Difficulty/ Non-existent
Other languages?	Please specify level of ability.	Please specify level of ability.

DESTINATION COUNTRY CONNECTIONS (Both Partners Combined)

Do you have family in your destination country? (circle as applicable)	Yes / No
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If yes, please give details of your closest relatives in your destination country;

Family relationship (eg. brother, aunt)	
Location (city & post-code) and how long resident there?	
Their residence status – (circle as applicable)	Citizen / Permanent Resident / On Temporary Visa

Other family relationship (eg. brother, aunt)	
Location (city & post-code) and how long resident there?	
Their residence status	Citizen / Permanent Resident / On Temporary Visa

Please give details of your closest relatives in your current country of residence . (Indicate the total number of close relatives in your current country of residence eg brothers, sisters, parents, adult children).	
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ADDITIONAL INFORMATION (Both Applicants Combined)

Do you or any of those accompanying you have any health problems or chronic illnesses?	Yes / No
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If so, please give details:

Have you or any of those accompanying you been charged or served time for a criminal offence (or are currently under investigation) , been deported from or refused entry/residency to any country, or been involved with known criminal or terrorist groups? If so, please give details:	Yes / No
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If planning to work, do you have a job arranged? Yes / No	Yes / No
If Yes, please state company name, job title, work duties, salary, and start date;-	

If No, do you require further assistance in finding employment?	Yes / No
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Are you planning a business or investment? Yes / No	Yes / No
If Yes, please state the type of business or investment that interests you below.	

Assuming you are eligible, when do you plan to proceed with a residence application? (circle as applicable)	Immediately/Within several months/Undecided
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Is there any further important information that should be known about you that may affect your application? (Please continue on separate sheet if necessary)	
How did you hear about Adgbenfash C. Ltd ? (Specific publication, website or person?)	
Have you already spoken to Adgbenfash C. Ltd adviser?	Yes / No
If yes, please state the representative's name.	

Declaration - I hereby state that the information contained in this form is, to the best of my knowledge an accurate and truthful statement of my past and current situation.

Signed (sign or type) Full Name: Date:

Adgbenfash Consulting Limited cannot accept responsibility for an assessment or subsequent residence application made from information that is untrue, incorrect, incomplete or misleading. Adgbenfash Consulting Limited reminds all clients that the final decision in respect of immigration is for the relevant immigration authorities.

Important Immigration Regulatory Compliance Notice: Our company places the utmost importance on adhering to the immigration legislation and codes of conduct of the immigration regulatory bodies of Denmark, Austria, Norway, Australia, Canada, New Zealand, USA and UK, and we serve to protect client interests by delivering and confirming all specific immigration advice solely in writing. In contacting us and instructing our company at each and every stage in the process (either by phoning us or writing to us, meeting with us, completing visa assessments, service agreement forms, and interacting with us in way), you are accepting our company policy that specific "immigration advice" will only be provided to you, and be accepted by you, IN WRITING when signed by our OISC regulated Immigration adviser (see details of these personnel and the code of conduct on our official registrations). Please do not act in any way until this signed written confirmation has been received by you. We will not accept responsibility for any actions, loss or damage if you fail to comply with this important company policy.