

**Questionnaire:**

Completing this questionnaire in its entirety and returning it to us will allow us to better help you discover what your best options are for resettling in Canada. The more detailed the information you provide, especially in connection to your education and work experience, the more accurate an evaluation of your resettlement options will be.

Please complete one questionnaire for **each adult** 18 and over.

**Preliminary information**

<b>Name:</b>	_____	<b>Date of birth:</b>	M	_____	D	_____	A	_____
<b>First Name:</b>	_____	<b>Civil status:</b>	_____					
<b>N° and street:</b>	_____	<b>Children</b>	_____	<b>Ages:</b>	_____			
<b>City:</b>	_____	<b>Do you have friends in Quebec?</b>	_____					
<b>Country:</b>	_____	<b>Do you have family in Quebec or Canada?</b>	_____					
<b>Nationality:</b>	_____	<b>Relation?</b>	_____	<b>Where?</b>	_____			
<b>Telephone:</b>	_____	<b>Have you travelled, studied or worked in:</b>						
<b>Mobile phone:</b>	_____	<b>Québec?</b>	_____					
<b>Fax number:</b>	_____	<b>Canada?</b>	_____					
<b>E-mail:</b>	_____	<b>Where?</b>	_____					
		<b>Dates?</b>	_____					

Where would you like to live in Canada?

**II. Employment Experience:**

**Present employment/Occupation:** provide a description of your tasks and responsibilities. Specify if you are employed or self-employed as well as the date you began.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Previous employment (during the last 10 years only)** provide hours worked, tasks and responsibilities and dates worked:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total work experience equivalent to full time: \_\_\_\_\_ years \_\_\_\_\_ months

Total work experience **in your profession** following your final diploma: \_\_\_\_\_ years \_\_\_\_\_ months

**Monthly income (gross):** \_\_\_\_\_ **Annual income** \_\_\_\_\_.

**III. Business Experience:**

Are you self-employed? \_\_\_\_\_ In which occupation/profession? \_\_\_\_\_

Do you own a business \_\_\_\_\_ What is it? \_\_\_\_\_

Number of employees: \_\_\_\_\_ Do you wish to invest or start a business in Quebec or Canada? \_\_\_\_\_

Date self-employment or business began : From: \_\_\_\_\_ To : \_\_\_\_\_

Do you have a personal and/or business net worth of: (assets may include your home or apartment, other personal or business property, equipment, automobiles, cash, bonds, investments, etc. but may **not** include jewellery, furniture or other personal possessions of value.):

\$100.000 CA - \$125.000 CA? Yes \_\_\_\_\_ No \_\_\_\_\_  
 \$125.000 CA - \$175.000 CA? Yes \_\_\_\_\_ No \_\_\_\_\_  
 \$175.000 CA +? Yes \_\_\_\_\_ No \_\_\_\_\_  
 \$300.000 CA +? Yes \_\_\_\_\_ No \_\_\_\_\_  
 \$800.000 CA +? Yes \_\_\_\_\_ No \_\_\_\_\_

**IV. Education** – a) Dates & No. of years:

Indicate the number of years (equivalent to full time) and the dates of your education.	N° years	From			To		
		m	d	y	m	d	y
<b>Primary:</b>							
<b>Secondary:</b>							
<b>Post-secondary</b>	Technical school/college						
	University						
<b>Formal Apprenticeship (specify):</b>							

b) Diplomas received :

	Diploma	Specialty
Secondary:		
Technical college:		
University:		

**Other studies:** (language courses, professional development, etc)

**Language Knowledge:** Indicate your level of knowledge.

	0	Beginner					Intermediate					Advanced					
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<b>French:</b>																	
Oral comprehension																	
Oral expression																	
<b>English:</b>																	
Oral comprehension																	
Oral expression																	
Writing skills																	
Reading skills																	

**Additional Information** (Any details you might consider important with respect to your education and work experience)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

# MARRIED OR COMMON LAW SPOUSE

## Preliminary information

Name:		Date of birth:	M		D		A	
First Name:		Civil status:			Sex:			
N° and street:		Children			Ages:			
City:		Do you have friends in Quebec?						
Country:		Do you have family in Quebec or Canada?						
Nationality:		Relation?			Where?			
Telephone:		Have you travelled, studied or worked in:						
Mobile phone:		Québec?						
Fax number:		Canada?						
E-mail:		Where?						
		Dates?						

Where are you going to live in Canada?

## II. Employment Experience:

**Present employment/Occupation:** provide a description of your tasks and responsibilities. Specify if you are employed or self-employed as well as the date you began.

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**Previous employment (during the last 10 years only)** provide hours worked, tasks and responsibilities and dates worked:

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Total work experience equivalent to full time: _____ years		_____ months	
Total work experience <b>in your profession</b> following your final diploma: _____ years		_____ months	

Monthly income (gross): \_\_\_\_\_ Annual income: \_\_\_\_\_

## III. Business Experience:

Are you self-employed? \_\_\_\_\_ In which occupation/profession? \_\_\_\_\_

Do you own a business \_\_\_\_\_ What is it? \_\_\_\_\_

Number of employees: \_\_\_\_\_ Do you wish to invest or start a business in Quebec or Canada? \_\_\_\_\_

Date self-employment or business began : From: \_\_\_\_\_ To : \_\_\_\_\_

**Do you have a personal and/or business net worth of:** (assets may include your home or apartment, other personal or business property, equipment, automobiles, cash, bonds, investments, etc. but may **not** include jewellery, furniture or other personal possessions of value.):

\$100.000 CA - \$125.000 CA?	Yes	_____	No	_____
\$125.000 CA - \$175.000 CA?	Yes	_____	No	_____
\$175.000 CA +?	Yes	_____	No	_____
\$300.000 CA +?	Yes	_____	No	_____
\$800.000 CA +?	Yes	_____	No	_____

**IV. Education** – a) Dates & No. of years:

Indicate the number of years (equivalent to full time) and the dates of your education.	N° years	From			To		
		m	d	y	m	d	y
<b>Primary:</b>							
<b>Secondary:</b>							
<b>Post-secondary</b>	Technical school/college						
	University						
<b>Formal Apprenticeship (specify):</b>							

b) Diplomas received :

	Diploma	Specialty
<b>Secondary:</b>		
<b>Technical college:</b>		
<b>University:</b>		

**Other studies:** (language courses, professional development, etc)

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**Language Knowledge:** Indicate your level of knowledge.

	0	Beginner					Intermediate					Advanced					
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
<b>French:</b>																	
Oral comprehension																	
Oral expression																	
<b>English:</b>																	
Oral comprehension																	
Oral expression																	
Writing skills																	
Reading skills																	

**Additional Information** (Any details you might consider important with respect to your education and work experience)

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Please mail, e-mail or fax to :



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