



SKYWHEEL IMMIGRATION SERVICES INC.

Document Checklist Visitor Visa

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- /" Xkuc'eqr kgu"kh'tcxgmgf +"
- /" 3'Rcuur qt v'Uk g'r j qvqi tcr j '*F ki kcn#"
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- /" Cp{ 'Rtqr gt v{ 'kp'y j g'Cr r hcepv'pco g'////'qtki kpcn'cpf 'tcpuur v'kqp
- /" Nkg'kpuwt cpeg'r qrk { 'kh'cp{ "

F qewo gpw'tgs wktgf 'Htqo 'Ur qpuqt

- /" Rcuur qt v'Eqr { ."
- /" RT'Ectf 'eqr { '*dqj 'ukf gu+'qt 'Uwf { 'Rgto kv'qt 'Y qtm'Rgto kv'
- /" Rtqqh'qh'T gr v'kqp '*Dk y 'egt v'hlecvg IO cttkci g'Egt v'hlecvg"+
- /" Dcpm'Uvcgo gpv'hqt 'y j g'Ur qpuqt "
- /" Rtqqh'qh'Go r m{ o gpv'kh'RT'ectf 'qt 'Y qtm'Rgto kv'*Lqd'Ngwgt.'Rc{ 'uwd+
- /" Uwf { 'f qewo gpw'gptqm gpv'ngwgt htcpuetkr w+'hqt 'Ur qpuqt 'y j q'ku'qp 'Uwf { ''''

Rgto kv''

- /" Rtqr gt v{ 'qy pgtuj k "

Address:

Ph. No: - 3'46; /; ; 8/2777

Email Address: kphqB un{ y j ggiko o ki tcvkqp@eqo

INFORMATION SHEET

REQUIRED INFORMATION OF THE APPLICANT:

1. Name of the Applicant (according to the passport)

Family name
Given name
Date of Birth

2. ANY PREVIOUS COUNTRIES OF RESIDENCE IN THE PAST 5 YEARS:

IF YES PLEASE FILL THE TABLE BELOW

FROM (YR-MM-DD)	TO(YR-MM-DD)	COUNTRY	STATUS IN THAT COUNTRY

3. MARITAL STATUS :

4. MARRIAGE DATE :

5. Name of spouse --if married

Last name	First name
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6. ANY PREVIOUS MARRIAGES? (kindly say yes if the spouse is deceased)

If yes

Family name	Given name	Date of birth	Date of marriage	Date of separation/date of death of spouse

7. MOTHER TONGUE:

8. CURRENT COMPLETE RESIDENTIAL ADDRESS:

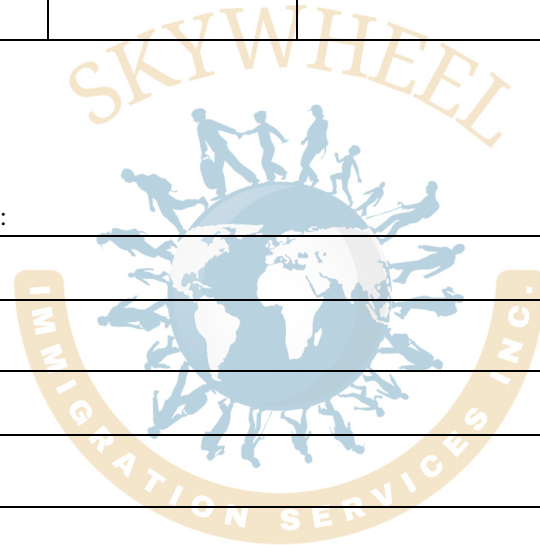
9. EMAIL ID:

10. CONTACT NUMBER:

11. EDUCATION DETAILS,

PLEASE PROVIDE YOUR HIGHEST LEVEL OF EDUCATION IN THE BELOW TABLE

FROM(Year - Month)	TO(YR-MM)	SCHOOL NAME	LEVEL OF EDUCATION	CITY AND COUNTRY



12. EMPLOYMENT DETAILS FROM THE PAST 10 YEARS

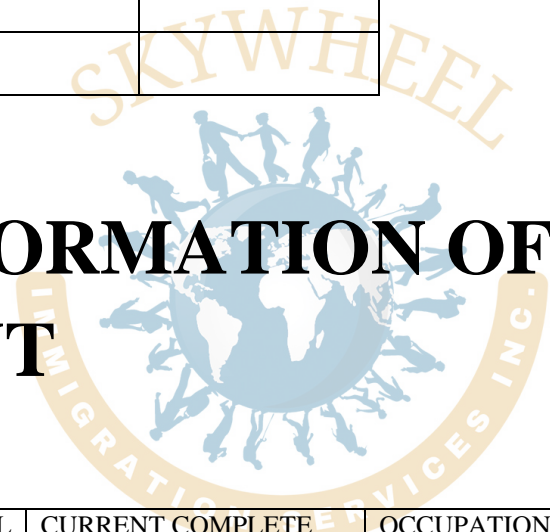
FROM(YR-MM)	TO(YR-MM)	COMPANY NAME	OCCUPATION	CITY AND COUNTRY

13. ANY PREVIOUS VISA REFUSAL'S TO CANADA OR ANY OTHER COUNTRY?

Country	Visa refused-type	Year	How many times

14. PLEASE PROVIDE PAST 5 YEARS TRAVEL HISTORY IN THE BELOW TABLE (IF APPLICABLE)

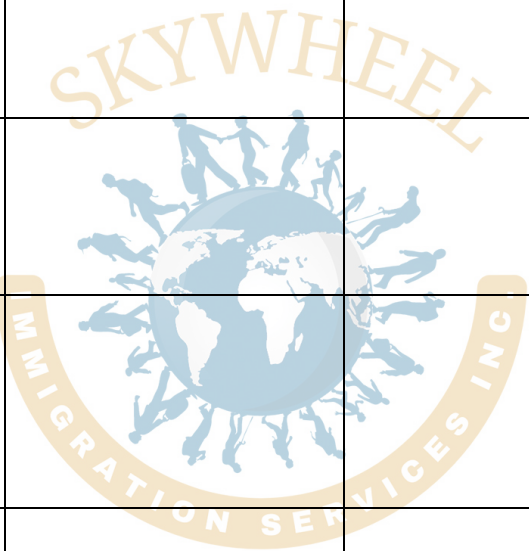
FROM(YR-MM)	TO(YR-MM)	PURPOSE OF VISIT	CITY AND COUNTRY



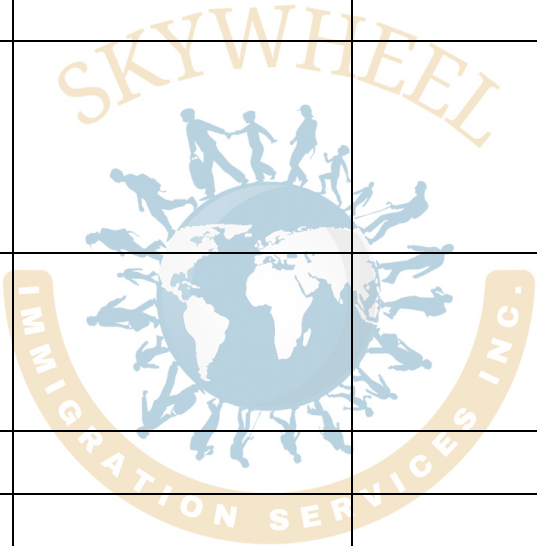
15. FAMILY INFORMATION OF THE APPLICANT

RELATIONSHIP TO APPLICANT	FULL NAME	DATE OF BIRTH	PLACE OF BIRTH	MARITAL STATUS	CURRENT COMPLETE RESIDENTIAL ADDRESS	OCCUPATION
FATHER						
MOTHER						
SPOUSE						

SON 1						
SON 2						
SON 3						
DAUGHTER 1						
DAUGHTER 2						
DAUGHTER 3						
BROTHER 1						



BROTHER 2						
BROTHER 3						
BROTHER 4						
SISTER 1						
SISTER 2						
SISTER 3						
SISTER 4						



BREIFLY EXPLAIN YOUR PURPOSE OF VISIT



REQUIRED INFORMATION FROM SPONSOR

- Name of the Sponsor

- Relation of Sponsor with Applicant

- Total family size (total family members)

- Total income of Sponsor –

- Current Complete Residential Address:

- Total number of bedrooms in your residential property (this shows that you could provide accommodation to the applicant)

- Email ID:

- Contact number:

