## **FAMILY INFORMATION**

|   | ــــ<br>and in your r      |  | Other  Arabic, Cyrillic, Chinese, Chinese commercial/telegraphic ompanying you. If you need more space for any section, print of |                       |                         |
|---|----------------------------|--|--|-----------------------|-------------------------|
| page containing the appropriate se                |                            |  |  | out an ad             | ullional                |
| BEFORE YOU START, READ TH                         | E INSTRUCTION              | ON GUIDE, TYPE OR PRINT  | IN BLACK INK.  |                       |                         |
| SECTION A   |                            |  |  |                       |                         |
| Name  | Relationship<br>SEE NOTE 1 | Date of birth<br>(YYYY-MM-DD)  | Present address<br>(if deceased: give city/town, country and date)   | Will account you to C |                         |
|   |                            |  |  |                       |                         |
| Marital status:                                   | Applicant                  | Country of birth:  | Present occupation:  |                       |                         |
|   | Spouse or                  |  |  |                       |                         |
| Marital status:                                   | common-law<br>partner      | Country of birth:  | Present occupation:  |                       |                         |
|   | Mother                     | Country of birth:  |  |                       |                         |
| Marital status:                                   |                            |  | Present occupation:  |                       |                         |
|   | Father                     | Country of birth:  |  |                       |                         |
| Marital status:                                   | - Laute                    | ,  | Present occupation:  |                       |                         |
| NOTE 1: If no spouse or common-lav                | w partner is liste         | d in Section A, read and sign be   | low.   |                       |                         |
| I certify that I do not have a spouse of          | or a common-law            | partner.   |  |                       |                         |
| Signature:  |                            |  | Date (YYYY-MM-DD)  |                       |                         |
| SECTION B - CHILDREN (Include                     | ALL sons and               | daughters, including ALL add   | opted and step-children, regardless of age or place of residence   | :)                    |                         |
| Name  | Relationship<br>SEE NOTE 2 | Date of birth<br>(YYYY-MM-DD)  | Present address  |                       |                         |
|   |                            | (TTTT-IVIIVI-UU)   | (if deceased: give city/town, country and date)  | you to C              | ompany<br>Canada?<br>NO |
|   |                            |  | (if deceased: give city/town, country and date)  | you to C              | Canada?                 |
| Marital status:                                   |                            | Country of birth:  | (if deceased: give city/town, country and date)  Present occupation:   | you to C              | Canada?                 |
| Marital status:                                   |                            |  |  | you to C              | Canada?                 |
| Marital status:  Marital status:                  |                            | Country of birth:  |  | you to C              | Canada?                 |
|   | -                          | Country of birth:  Country of birth:                                       | Present occupation:  | you to C              | Canada?                 |
|   |                            | Country of birth:  | Present occupation:  | you to C              | Canada?                 |
| Marital status:                                   |                            | Country of birth:  Country of birth:                                       | Present occupation:  Present occupation:   | you to C              | Canada?                 |
| Marital status:                                   |                            | Country of birth:  Country of birth:  Country of birth:                    | Present occupation:  Present occupation:   | you to C              | Canada?                 |
| Marital status:  Marital status:                  | ection B, read an          | Country of birth:  Country of birth:  Country of birth:                    | Present occupation:  Present occupation:  Present occupation:  | you to C              | Canada?                 |
| Marital status:  Marital status:  Marital status: |                            | Country of birth:  Country of birth:  Country of birth:  Country of birth: | Present occupation:  Present occupation:  Present occupation:  | you to C              | Canada?                 |



## SECTION C - BROTHERS AND SISTERS (Include ALL brothers and sisters, ALL half-brother and sister and stepbrother and sister.)

| Name   | Relationship<br>SEE NOTE 2 | Date of birth<br>(YYYY-MM-DD) | Present address<br>(if deceased: give city/town, country and date) | Will acco<br>you to C<br>YES | ompany<br>anada?<br>NO |  |  |
|--|----------------------------|-------------------------------|--|------------------------------|------------------------|--|--|
| Marital status:  |                            | Country of birth:             | Present occupation:  |                              |                        |  |  |
| Marital status:  |                            | Country of birth:             | Present occupation:  |                              |                        |  |  |
| Marital status:  |                            | Country of birth:             | Present occupation:  |                              |                        |  |  |
| Marital status:  |                            | Country of birth:             | Present occupation:  |                              |                        |  |  |
| Marital status:  |                            | Country of birth:             | Present occupation:  |                              |                        |  |  |
| Marital status:  |                            | Country of birth:             | Present occupation:  |                              |                        |  |  |
| Marital status:  |                            | Country of birth:             | Present occupation:  |                              |                        |  |  |
| SECTION D - CERTIFICATION  I certify that the information contained in this document is complete, accurate and factual. I also realize that once this document has been completed and signed that it will form part of my Immigration Record and will be used to verify my family details on future applications.  Signature:  Date (YYYY-MM-DD) |                            |                               |  |                              |                        |  |  |

Personal information provided on this form is collected by Immigration, Refugees, and Citizenship Canada (IRCC) under the authority of the *Immigration and Refugee Protection Act* (IRPA). The personal information provided will be used for the purpose of processing an application. The personal information provided may be disclosed to other federal government institutions, law enforcement bodies, provincial/territorial governments, foreign governments for the purpose of validating identity, eligibility and admissibility. The personal information may also be disclosed to medical practitioners for the purpose of validating identity and eligibility.

Personal information may also be used for other purposes including research, statistics, program and policy evaluation, internal audit, compliance, risk management, subsequent program eligibility, and strategy development and reporting.

Failure to complete the form in full may result in a delay or the application not being processed. *The Privacy Act* gives individuals the right of access to, protection, and correction of their personal information. If you are not satisfied with the manner in which IRCC handles your personal information, you may exercise your right to file a complaint to the Office of the <u>Privacy Commissioner of Canada</u>. The collection, use, disclosure and retention of your personal information is further described in IRCC's Personal Information Bank – IRCC PPU 013, 051, 068.