

- Family Name  
**Loubassou**
- First (and additional) Name(s)  
**Reginald bergess**
- Date of birth (YYYY-MM-DD)  
**1997-10-03**
- Email address  
**loubassoubergess11@gmail.com**
- Phone number  
**+905338712670**
- City/ Town of residence  
**Kyrenia**
- Province/ State of residence  
**Girne**
- Country of residence  
**Cyprus**
- What is your country of citizenship 1?  
**Congo, Republic of**
- What is your country of citizenship 2? (optional)  
**Cyprus**
- Are you (or the person you are filling this out for) interested in applying for Canadian work permits or permanent residence?  
**Yes**
- Are you (or the person you are filling this out for) disabled and dependent on at least one parent for financial support?  
**Yes**
- Do you (or the person you are filling this out for) have a parent who is a Canadian permanent resident or Canadian citizen?  
**Yes**
- Are you (or the person you are filling this out for) adopted by that Canadian parent?  
**No**
- Did your Canadian parent(s) become a permanent resident before you were born?  
**Family sponsorship?**
- Would you like professional assistance with the application process?  
**Yes**