

- Family Name
test
- First (and additional) Name(s)
test
- Date of birth (YYYY-MM-DD)
1999-02-05
- Email address
test@email.check
- Phone number
112233
- Address
fsd
- City/ Town of residence
fsd
- Province/ State of residence
fsd
- Country of residence
Canada
- What is your country of citizenship 1?
Cabo Verde
- Are you (or the person you are filling this out for) interested in applying for Canadian permanent residence?
No
- Are you (or the person you are filling this out for) interested in applying for Canadian citizenship?
No
- Have you or your spouse been refused Canadian permanent residence?
Yes
- Was it following a spousal or family sponsorship application?
No
- Was the date of refusal within the last 30 days?
No
- Would you like professional assistance with a Federal Court application?
Yes