

- Family Name  
**OSSO**
- First (and additional) Name(s)  
**Mustafa**
- Date of birth (YYYY-MM-DD)  
**1977-02-10**
- Email address  
**mustafaosso58@gmail.com**
- Phone number  
**05394194324**
- Address  
**Turkey ELAZIĞ**
- City/ Town of residence  
**ELAZIĞ BASKIL TOPAL KEM**
- Province/ State of residence  
**ELAZIĞ**
- Country of residence  
**Turkey**
- What is your country of citizenship 1?  
**Canada**
- What is your country of citizenship 2?  
**Syria**
- What is your country of citizenship 3?  
**Germany**
- What is your country of citizenship 4?  
**Canada**
- Are you (or the person you are filling this out for) interested in applying for Canadian 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?  
**Yes**
- Would you like professional assistance with the application process?  
**Yes**