



SCHEDULE A
BACKGROUND / DECLARATION

FOR CIC USE ONLY
Client ID/UCI/FOSS ID

Before you start completing this form, make enough photocopies for your needs. You can also print all or part of this form from our Web site at www.cic.gc.ca.

If there is not enough space to provide all the necessary information, attach to this form a separate sheet of paper with further details. Print your name at the top of each additional sheet and indicate the form's title and the number of the question you are answering.

BEFORE YOU START, READ THE INSTRUCTION GUIDE
TYPE or PRINT in black ink

Indicate whether you are			
<input type="checkbox"/> The principal applicant		<input checked="" type="checkbox"/> The spouse, common-law partner or dependent child aged 18 years or older of the principal applicant	
1. Your full name			
Family name LEITE DE ALMEIDA		Given name(s) ALYNNE	
2. Your full name written in your native language or script (e.g. Arabic, Cyrillic, Chinese, Korean, Japanese characters or Chinese commercial/telegraphic code) ALYNNE LEITE DE ALMEIDA			3. Your date of birth (YYYY-MM-DD) 1984-06-20
4. Personal details of your father			
Family name DE ALMEIDA FILHO		Given name(s) JOSE CARLOS	
Date of birth (YYYY-MM-DD) 1947-05-25	Town/City of birth Aracaju-SE	Country of birth Brazil	Date of death, if deceased (YYYY-MM-DD) 2012-12-13
5. Personal details of your mother			
Family name at birth LEITE DE ALMEIDA		Given name(s) CANDIDA AUGUSTA	
Date of birth (YYYY-MM-DD) 1945-12-18	Town/City of birth Aracaju-SE	Country of birth Brazil	Date of death, if deceased (YYYY-MM-DD)
6. Have you, or, if you are the principal applicant, any of your family members listed in your application for permanent residence in Canada, ever:			
		YES	NO
a) been convicted of a crime or offence in Canada for which a pardon has not been granted under the <i>Criminal Records Act of Canada</i> ?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) been convicted of, or are you currently charged with, on trial for, or party to a crime or offence, or subject of any criminal proceedings in any other country?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
c) made previous claims for refugee protection in Canada or at a Canadian visa office abroad, in any other country or countries, or with the United Nations High Commissioner for Refugees (UNHCR)?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
d) been refused refugee status, an immigrant or permanent resident visa (including a <i>Certificat de sélection du Québec</i> (CSQ) or application to the Provincial Nominee Program) or visitor or temporary resident visa, to Canada or any other country?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) been refused admission to, or ordered to leave, Canada or any other country?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) been involved in an act of genocide, a war crime or in the commission of a crime against humanity?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) used, planned or advocated the use of armed struggle or violence to reach political, religious or social objectives?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) been associated with a group that used, uses, advocated or advocates the use of armed struggle or violence to reach political, religious or social objectives?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) been member of an organization that is or was engaged in an activity that is part of a pattern of criminal activity?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
j) been detained, incarcerated or put in jail?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
k) had any serious disease or physical or mental disorder?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
If your answer to any of these questions is YES, provide details below.			