

Government of Canada

Gouvernement du Canada

## **Application Summary**

## **Group information**

Do you want to apply for more than 1 person at the same time?

No

Application for a visitor visa	
I want to apply for a:	Canada-Ukraine authorization for emergency travel (CUAET)
Are you a Ukrainian national or an immediate family member?	I am a Ukrainian national who holds a valid Ukrainian passport
Do you want to work while you're in Canada?	Yes
I agree that my signature on my application for an authorization for emergency travel constitutes my signature on my open work permit application, and that it also constitutes my declaration that the information I have provided on this application is truthful, complete, and correct.	✓

Representative		
Are you applying on behalf of someone else?	No	

Surname/last name	Trachova	
Given name/first name	Varvara	
Date of birth	2004-08-01	
Gender	Female	
What document are you travelling with?	Passport	
What kind of passport? Regular		
Select the country code that matches the one on your passport	UKR (Ukraine)	
What's the nationality on your passport?	Ukraine	
What's your passport or travel document number?	002270950	
Confirm your passport or travel document number	002270950	
When was the passport issued?	2018-09-03	
Date of expiry of the passport 2022-09-03		
Are you a lawful permanent resident of the United States with a valid Green Card (alien registration card)?		
Have you held a Canadian visitor visa in the past 10 years?		
Do you currently hold a valid U.S. nonimmigrant visa?	No	
Are you travelling to Canada by air?	Yes	

Citizenship and places where the applicant has lived		
Country or territory where you were born		Ukraine
City or town where you were born		Melitopol
re you a citizen of more than one country or territory?		No
Which country or territory are you a citizen of?		
Country/territory of issue	Ukraine	
I am a citizen of this country or territory since birth	✓	
From	2004-08-01	

National identity document of the applicant		
Do you have a valid national identity document?	Yes	
Document number 002270950		
Confirm your document number 002270950		
Date of issue 2018-09-03		
Select the country or territory that issued this document  Ukraine		

### Names used in the past

Have you used another name in the past?

No

## **Contact information of the applicant**

	Hetmanska street, building 119, app. 85
Address	Melitopol 72319
	Ukraine

Is your mailing address the same as your residential address?

List your current country or territory of residence, then add all other countries or territories where you've lived for the past five years, for more than 6 months.

Country/territory	Ukraine
Status	Citizen
From	2004-08-01
This is where I currently live.	✓

## Biometrics (fingerprints and photo) of the applicant

Do we already have your fingerprints and photo (biometrics), and are they still valid?

No

## Information about education, work and other activities

### Post-secondary education history

Have you ever studied at a post-secondary school (university, college or vocational school)? You don't need to have completed a degree or diploma.

Yes

Give details of each program you have studied and are currently studying.	Taras Shevchenko National University of Kyiv
From	2021-09
Level of study	University - Bachelor's Deg.
Field of study	Arts/Humanities/Social Science
Ongoing	$\checkmark$
Address	Volodymyrska Street, building 64 Kyiv Ukraine

Have you had a medical exam performed by an IRCC authorized panel physician (doctor) within the last 12 months?	No	
I acknowledge that the immigration medical examination that is required as part of this immigration application is being waived, and that a condition may be added to my temporary resident status upon arrival in Canada stating that I will need to obtain a chest x-ray (or suitable alternative) and blood test for the purposes of detecting reportable communicable disease within 90 days of my arrival. Immigration, Refugees and Citizenship Canada will use the results of the tests to ensure appropriate identification of reportable communicable diseases in order to mitigate risks to public health and safety, including by sharing the results with provinces and territories. I hereby consent to submit to these tests.	<b>✓</b>	
<u> </u>	No	
In the last 2 years, were you diagnosed with tuberculosis?	No No	
In the last 2 years, were you diagnosed with tuberculosis?  In the last 5 years, have you been in close contact with a person with tuberculosis?		
In the last 2 years, were you diagnosed with tuberculosis?  In the last 5 years, have you been in close contact with a person with tuberculosis?  Medical background questions		
Medical background questions- Tuberculosis  In the last 2 years, were you diagnosed with tuberculosis?  In the last 5 years, have you been in close contact with a person with tuberculosis?  Medical background questions  Are you currently receiving dialysis treatment?  Have you had a drug or alcohol addiction causing you to be a threat to yourself or others, or to be hospitalized?	No	
In the last 2 years, were you diagnosed with tuberculosis?  In the last 5 years, have you been in close contact with a person with tuberculosis?  Medical background questions  Are you currently receiving dialysis treatment?  Have you had a drug or alcohol addiction causing you to be a threat to yourself or others, or to	No No	

What is your current marital status?	ingle
Children	
Do you have any biological, adopted or step-children?	No
I understand that I am not declaring any natural, adopted or step-child	Iren.

Family information

Tell us about your parents	Tell	us	about	your	parents
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Surname/last name	Trachov
Given name/first name	Viacheslav
Relationship	Father
Date of birth	1977-09-10
Country or territory of birth	Ukraine
Present occupation	Software developer
Does this parent have the same address as you?	Yes
Will this parent come with you to Canada?	Yes
Surname/last name	Trachova
Given name/first name	Daria
Relationship	Mother
Date of birth	1979-11-14
Country or territory of birth	Ukraine
Present occupation	Professor at the university
Does this parent have the same address as you?	Yes
Will this parent come with you to Canada?	Yes

## Language of the applicant

What is your native language or mother tongue?	Russian
Can you communicate in English and/or French?	English
What language do you want us to use to contact you?	English

## **Email address of applicant**

Email address	varyusha2002@gmail.com
Confirm your email address	varyusha2002@gmail.com

# Telephone number of the applicant

Telephone type	Cellular
Select telephone number country or territory	Other
Telephone number	+380 983833340

### **Documents to support your application**

Document name	National identity document
File name	passport_Varya.jpg
Size of the Document	516.00 KB
Date/time uploaded	2022-04-27 18:36:00 UTCZ
Document name	Passport/travel document
File name	passport_Varya.jpg
Size of the Document	516.00 KB
Date/time uploaded	2022-04-27 18:36:00 UTCZ

#### **Fees**

Fee	Quantity	Price	Total
Visitor visa	1	CAN\$100	CAN\$0
Biometrics	1	CAN\$85	CAN\$0
Total CAN\$0			

#### **Consent and declaration**

Citizenship and Immigration Canada (CIC), or an organization at CIC's request, may want to contact you in the future to ask you about any services you received from CIC prior to the application process (such as participation in an information forum), during the application process (including the application process itself as well as orientation or accreditation services), and services received after arriving in Canada (including settlement, integration and citizenship). CIC will use this information, along with the information provided by other individuals, for research, performance measurement or evaluation purposes. CIC will not use this information to make any decisions about you personally.

Do you consent to be contacted by CIC, or an organization at CIC's request, in the future?

Yes

I consent to the release to Citizenship and Immigration Canada (CIC) and Canada Border Services Agency (CBSA) of all records and information for the purpose of processing my request that any government authority, including police, judicial and state authorities in all countries in which I have lived may possess about me. This information will be used to evaluate my suitability for admission to Canada or to remain in Canada pursuant to Canadian legislation.

I declare that I have answered all questions in this application fully and truthfully.



#### Signature of Applicant or Parent/Legal Guardian's for a person under 18 years of age.

Surname/last name	Trachova
Given name/first name	Varvara

#### **Privacy Notice**

Personal information provided on this form is collected and will be used, disclosed, and retained 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 applications. The personal information provided may be disclosed to other federal government institutions and third parties including law enforcement bodies, provincial/territorial governments and/or foreign governments for the purpose of validating identity, eligibility and admissibility.

The personal information collected on an application, and other information collected in support of an application, may be used for computer analytics to support processing of applications and decision making, including your application. Personal information, including from computer analytics, may also be used for purposes including research, statistics, program and policy evaluation, internal audit, compliance, risk management, strategy development and reporting.

Where biometrics are provided in support of an application, the fingerprints collected will be stored and shared with the RCMP. The fingerprint record may also be disclosed to law enforcement agencies in Canada in accordance with subsection 13.11(1) of the Immigration and Refugee Protection Regulations. The information may be used to establish or verify the identity of a person in order to prevent, investigate, or prosecute an offence under any law of Canada or a Province. This information may also be used to establish or verify the identity of an individual whose identity cannot reasonably be otherwise established or verified because of physical or mental condition. Canada may also share immigration information related to biometric records with foreign governments with whom Canada has an agreement or arrangement.

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. Further details are available in Info Source. 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 Privacy Commissioner of Canada. The collection, use, disclosure and retention of your personal information is further described in IRCC's personal information bank - IRCC PPU 068.

