



FAMILY INFORMATION

Complete ALL names in English and in your native language (for example, Arabic, Cyrillic, Chinese, Chinese commercial/telegraphic code, Korean, or Japanese characters). Include ALL family members even if they are not accompanying you. If additional space is required, print and attach an additional form.

TYPE OR PRINT IN BLACK INK.

SECTION A

Name	Relationship SEE NOTE 1	Date of birth (YYYY-MM-DD)	Present address (if deceased: give city/town, country and date)	Will accompany you to Canada? YES NO
HIMANSHU SUSHIL SRIVASTAVA	APPLICANT	1991-05-07	1370 WHISTLE WAY APT 324, ZIONSVILLE IN, 46077, USA	
Marital status: Married-physically present		Country of birth: INDIA	Present occupation: Sr. Software Engineer	
ANUPRIYA RASTOGI	SPOUSE OR COMMON-LAW PARTNER	1991-02-10	1370 WHISTLE WAY APT 324, ZIONSVILLE IN, 46077, USA	<input checked="" type="checkbox"/> <input type="checkbox"/>
Marital status: Married-physically present		Country of birth: INDIA	Present occupation: Sr Product Specialist -Functnl	
GEETA SRIVASTAVA	MOTHER	1962-12-31	184 ADARSH NAGAR DEOKALI, FAIZABAD UP 224001 INDIA	<input type="checkbox"/> <input checked="" type="checkbox"/>
Marital status: Married		Country of birth: INDIA	Present occupation: POST MASTER	
SUSHIL KUMAR SRIVASTAVA	FATHER	1958-01-15	184 ADARSH NAGAR DEOKALI, FAIZABAD UP 224001 INDIA	<input type="checkbox"/> <input checked="" type="checkbox"/>
Marital status: Married		Country of birth: INDIA	Present occupation: LAWYER	
	PARENT			<input type="checkbox"/> <input type="checkbox"/>
Marital status:		Country of birth:	Present occupation:	

NOTE 1: If no spouse or common-law partner is listed in Section A, read and sign below.

I certify that I do not have a spouse or a common-law partner.

Signature: _____ Date (YYYY-MM-DD) _____

SECTION B - CHILDREN (Include ALL sons and daughters, including ALL adopted and step-children, regardless of age or place of residence)

Name	Relationship SEE NOTE 2	Date of birth (YYYY-MM-DD)	Present address (if deceased: give city/town, country and date)	Will accompany you to Canada? YES NO
URJIT GESHUA SRIVASTAVA	SON	2020-08-04	1370 WHISTLE WAY APT 324, ZIONSVILLE IN, 46077, USA	<input checked="" type="checkbox"/> <input type="checkbox"/>
Marital status: Single		Country of birth: USA	Present occupation: UNEMPLOYED	
				<input type="checkbox"/> <input type="checkbox"/>
Marital status:		Country of birth:	Present occupation:	
				<input type="checkbox"/> <input type="checkbox"/>
Marital status:		Country of birth:	Present occupation:	
				<input type="checkbox"/> <input type="checkbox"/>
Marital status:		Country of birth:	Present occupation:	

NOTE 2: If no children are listed in Section B, read and sign below.

I certify that I do not have any natural, adopted nor step-children.

Signature: _____ Date (YYYY-MM-DD) _____



FAMILY INFORMATION

Complete ALL names in English and in your native language (for example, Arabic, Cyrillic, Chinese, Chinese commercial/telegraphic code, Korean, or Japanese characters). Include ALL family members even if they are not accompanying you. If additional space is required, print and attach an additional form.

TYPE OR PRINT IN BLACK INK.

SECTION A

Name	Relationship SEE NOTE 1	Date of birth (YYYY-MM-DD)	Present address (if deceased: give city/town, country and date)	Will accompany you to Canada? YES NO
हिमांशु सुशील श्रीवास्तव Marital status: Married-physically present	APPLICANT	1991-05-07	1370 WHISTLE WAY APT 324, ZIONSVILLE IN, 46077, USA	
		Country of birth: INDIA	Present occupation: Sr. Software Engineer	
अनुप्रिया रस्तोगी Marital status: Married-physically present	SPOUSE OR COMMON-LAW PARTNER	1991-02-10	1370 WHISTLE WAY APT 324, ZIONSVILLE IN, 46077, USA	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Country of birth: INDIA	Present occupation: Sr Product Specialist -Functnl	
गीता श्रीवास्तव Marital status: Married	MOTHER	1962-12-31	184 ADARSH NAGAR DEOKALI, FAIZABAD UP 224001 INDIA	<input type="checkbox"/> <input checked="" type="checkbox"/>
		Country of birth: INDIA	Present occupation: POST MASTER	
सुशील कुमार श्रीवास्तव Marital status: Married	FATHER	1958-01-15	184 ADARSH NAGAR DEOKALI, FAIZABAD UP 224001 INDIA	<input type="checkbox"/> <input checked="" type="checkbox"/>
		Country of birth: INDIA	Present occupation: LAWYER	
	PARENT			<input type="checkbox"/> <input type="checkbox"/>
Marital status:		Country of birth:	Present occupation:	

NOTE 1: If no spouse or common-law partner is listed in Section A, read and sign below.

I certify that I do not have a spouse or a common-law partner.

Signature: _____ Date (YYYY-MM-DD) _____

SECTION B - CHILDREN (Include ALL sons and daughters, including ALL adopted and step-children, regardless of age or place of residence)

Name	Relationship SEE NOTE 2	Date of birth (YYYY-MM-DD)	Present address (if deceased: give city/town, country and date)	Will accompany you to Canada? YES NO
अर्जित वैशु श्रीवास्तव Marital status: Single	SON	2020-08-04	1370 WHISTLE WAY APT 324, ZIONSVILLE IN, 46077, USA	<input checked="" type="checkbox"/> <input type="checkbox"/>
		Country of birth: USA	Present occupation: UNEMPLOYED	
				<input type="checkbox"/> <input type="checkbox"/>
Marital status:		Country of birth:	Present occupation:	
				<input type="checkbox"/> <input type="checkbox"/>
Marital status:		Country of birth:	Present occupation:	
				<input type="checkbox"/> <input type="checkbox"/>
Marital status:		Country of birth:	Present occupation:	

NOTE 2: If no children are listed in Section B, read and sign below.

I certify that I do not have any natural, adopted nor step-children.

Signature: _____ Date (YYYY-MM-DD) _____

SECTION C- CERTIFICATION

I certify that the information contained in this document is complete, accurate and factual. I also realize that once this document has been completed and signed that it will form part of my Immigration Record and will be used to verify my family details on future applications.

Signature:  Date (YYYY-MM-DD) 2021-07-31

The information you provide on this form is collected under the authority of the *Immigration and Refugee Protection Act* to determine if you may be admitted to Canada as a temporary resident. It will be stored in Personal Information Bank CIC PPU 055, Visitor Case File. It is protected and accessible under the *Privacy Act* and the *Access to Information Act*.

INSTRUCTIONS**Who needs to fill out this application form?**

This form must be completed by:

- each person, **18 years of age or older**, or
- a minor (**less than 18 years of age**) travelling alone.

SECTION A

Write the personal details for:

- yourself,
- your spouse or common-law partner, (if applicable)
- your mother and
- your father
- or parent.

Include: full name, date of birth, country of birth, present address and occupation (job).

Check **Yes** or **No** to indicate if the person will accompany you to Canada.

If a person is deceased, indicate in which city/town, country and the date of death under "Present address".

If a person is not employed, indicate whether the person is retired, studying, etc.

If a section does not apply to you write "Not applicable" or "N/A".

Note: If you do not have a spouse or a common-law partner, read "Note 1", sign and date the declaration.

SECTION B

Write the personal details for your children. It is very important that you list all of your children (even if they are already permanent residents or citizens of Canada). This includes:

- married children,
- adopted children,
- children of your spouse(step-children) or common-law partner,
- any of your children who have been adopted by others,
- any of your children who are in the custody of an ex-spouse, former common-law partner or other guardian.

Include: full name, relationship (e.g. brother, step-sister) date of birth, country of birth, marital status (married, single, widowed, common-law, divorced, separated, annulled marriage), present address and occupation (job).

Check **Yes** or **No** to indicate if the person will accompany you to Canada.

If a person is not employed, indicate whether the person is retired, studying, etc.

Note: If you do not have any children, read "Note 2", sign and date the declaration.

SECTION C**Signature**

Sign and date in the boxes provided at the bottom of the page.

Note: By signing, you certify that you fully understand the questions asked, and that the information you have provided is complete, accurate and factual. If you do not sign or date the form, your application will be returned to you