

**FAMILY INFORMATION**

申請者ご本人様の情報と、ご両親の情報、

お子様がいらっしゃる場合はお子様の情報を記入ください。

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 (Year/Month/Day)	Present address (If deceased, give city/town, country and date)	Will accompany you to Canada? Yes <input type="checkbox"/> No <input type="checkbox"/>
		Country of birth	Present occupation	
氏名をローマ字、 そして漢字で記載	Applicant 本人	生年月日 [] [] [] [] [] []	現住所 (IMM1295と同様のご住所)	「YES」を <input checked="" type="checkbox"/> <input type="checkbox"/>
	Spouse or common-law partner	生まれた国 [] [] [] [] [] []	現在のご職業	「NO」を <input type="checkbox"/> <input checked="" type="checkbox"/>
	Mother 母	[] [] [] [] [] []		「NO」を <input type="checkbox"/> <input checked="" type="checkbox"/>
	Father 父	[] [] [] [] [] []		「NO」を <input type="checkbox"/> <input checked="" type="checkbox"/>

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.

↓作成された日付を選択

Year Month Day

Signature ► _____

Date [] [] [] [] [] []

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 (Year/Month/Day)	Marital status	Present address	Will accompany you to Canada? Yes <input type="checkbox"/> No <input type="checkbox"/>
		Country of birth		Present occupation	
		[] [] [] [] [] []			「NO」を <input type="checkbox"/> <input checked="" type="checkbox"/>
		[] [] [] [] [] []			「NO」を <input type="checkbox"/> <input checked="" type="checkbox"/>
		[] [] [] [] [] []			「NO」を <input type="checkbox"/> <input checked="" type="checkbox"/>
		[] [] [] [] [] []			「NO」を <input type="checkbox"/> <input checked="" type="checkbox"/>

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.

↓作成された日付を選択

Year Month Day

Signature ► _____

Date [] [] [] [] [] []

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.

↓作成された日付を選択

Year Month Day

Signature ► _____

Date [] [] [] [] [] []

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*.