

Government  
of CanadaGouvernement  
du Canada

## Application Summary

### Group information

Do you want to apply for more than 1 person at the same time?	Yes
Group type	Family
Group name	family

### 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 Ukrainian passport or other travel document
Select the province or territory where you plan to live or work	Unknown
Do you want to work while you're in Canada?	No

### Representative

Are you applying on behalf of someone else?	Yes
Are you an authorized paid representative?	No
Who are you in relation to the person you're helping?	Family member
Surname/last name	Yaitska
Given name/first name	Anastasiia

#### Telephone number

Telephone type	Other
Select telephone number country or territory	Other
Telephone number	+45 50266204

Address	Waldemarsgade 4, 1th Olgod 6870 Denmark
Email address	yaitska.anastasiia@gmail.com
Confirm your email address	yaitska.anastasiia@gmail.com

**Travel document information of the applicant**

Surname/last name	Borodina
Given name/first name	Sascha
Date of birth	2021-07-12
Gender	Female

**Travel document of the applicant**

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?	PU602523
Confirm your passport or travel document number	PU602523
When was the passport issued?	2021-12-30
Date of expiry of the passport	2025-12-30
Are you a lawful permanent resident of the United States with a valid Green Card (alien registration card)?	No
Have you held a Canadian visitor visa in the past 10 years?	No
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	Denmark
City or town where you were born	Herning
Are 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	<input checked="" type="checkbox"/>
From	2021-07-12

**National identity document of the applicant**

Do you have a valid national identity document?	No
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**Names used in the past**

Have you used another name in the past?

No

**Contact information of the applicant**

Address Waldemarsgade 4, 1th  
Olgod 6870  
Denmark

Is your mailing address the same as your residential address? Yes

List your current country or territory of residence, then add all other countries or territories where you've lived since you were born, for more than 6 months.

Country/territory	Denmark
Status	Other
Other status detail	family reunion
From	2021-07-12
This is where I currently live.	<input checked="" type="checkbox"/>

**Children 16 years old and younger – parent or guardian information**

Is the child travelling to Canada with a parent or legal guardian? Yes

Who will travel with the child? Both parents or legal guardians

**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. No

**Medical background questions**

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. ☒

Do you want to work in one of the following jobs?

- health sciences worker
  - clinical laboratory worker
  - patient attendant in nursing or geriatric homes
  - medical student admitted to Canada to attend university
  - medical elective and physician on short term assignment
  - teacher of primary or secondary schools or other teachers of small children
  - domestics worker, someone who gives in-home care to children, the elderly and the disabled
  - day nursery worker
- No

**Medical background questions- Tuberculosis**

In the last 2 years, were you diagnosed with tuberculosis? No

In the last 2 years, have you been in close contact with a person with tuberculosis? No

**Medical background questions**

Are you currently receiving dialysis treatment? No

Have you had a drug or alcohol addiction causing you to be a threat to yourself or others, or to be hospitalized? No

Have you had a mental health condition causing you to be a threat to yourself or others, or to be hospitalized? No

Have you ever been diagnosed with syphilis? No

**Family information**

What is your current marital status? Single

**Children**

Do you have any biological, adopted or step-children? No

I understand that I am not declaring any natural, adopted or step-children. ☒

**Tell us about your parents**

Surname/last name	Yaitska
Given name/first name	Anastasiia
Relationship	Mother
Date of birth	1991-07-05
Country or territory of birth	Ukraine
Present occupation	unemployed
Does this parent have the same address as you?	Yes
Will this parent come with you to Canada?	Yes

Surname/last name	Borodin
Given name/first name	Sergii
Relationship	Father
Date of birth	1989-01-28
Country or territory of birth	Ukraine
Present occupation	unemployed
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?	Ukrainian
Can you communicate in English and/or French?	Neither
What language do you want us to use to contact you?	English

**Email address of applicant**

Email address	yaitska.anastasiia@gmail.com
Confirm your email address	yaitska.anastasiia@gmail.com

**Documents to support your application**

Document name	Immigration status (proof)
File name	photo_2022-09-12_12-29-33.jpg
Size of the Document	342.00 KB
Date/time uploaded	2022-09-28 19:50:04 UTCZ
Document name	Passport/travel document
File name	photo_2022-09-12_12-39-14.jpg
Size of the Document	245.00 KB
Date/time uploaded	2022-09-28 19:50:04 UTCZ
Document name	Additional documents
File name	parents pas.pdf.pdf
Size of the Document	1,391.00 KB
Date/time uploaded	2022-09-28 19:50:04 UTCZ

**Fees**

Fee	Quantity	Price	Total
Visitor visa	1	CAN\$100	CAN\$0
<b>Total</b>			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	Borodina
Given name/first name	Sascha

**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.

