



# CANADA VISA

APPLICATION FOR WORKING VISA  
MADE OUTSIDE OF CANADA



1 PASPORT NUMBER EM0153767	2 I want service in ORANGE GARDEN <input type="checkbox"/>	3 Visa requested SINGLE	OFFICE USE ONLY Validated
-------------------------------	---	----------------------------	------------------------------

## PERSONAL DETAILS

1 Full name Family name (as shown on your passport or travel document) MD:Ataur Rahman	Given name(s) (as shown on your passport or travel document)
--	--



2 Have you ever used any other name? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Nickname/Alias Family name	Given name(s)

3 Sex MALE	4 Date of birth 1980 04 21 YYYY MM DD	5 Place of birth City/Town Saudi Arab Country Saudi Arab
---------------	---	--

6 Citizenship BANGLADESH
-----------------------------

Country	Status	Other	From	To
BANGLADESH	WORKER	CANADA VISA	YYYY-MM-DD	YYYY-MM-DD

8 Previous countries of residence: During the past five years have you lived in any country other than your country of citizenship or your current country of residence (indicated above) for more than six months? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
---

Country	Status	Other	From	To
BANGLADESH		CANADA VISA	YYYY-MM-DD	YYYY-MM-DD
			YYYY-MM-DD	YYYY-MM-DD

9 Country where applying: Same as current country of residence? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
---

Country	Status	Other	From	To
BANGLADESH	WORKER	CANADA VISA	YYYY-MM-DD	YYYY-MM-DD

10 a) Your current marital status <input type="checkbox"/>	b) (If you are married or in a common-law relationship) Provide the date on which you were married or entered into the common-law relationship	Date YYYY-MM-DD
--	--	--------------------

c) Provide the name of your current Spouse/Common-law partner Family name	Given name(s)
--	---------------

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

Applicant Name MD Ataur Rahman	Date of Birth <b>21-04-1980</b>
-----------------------------------	------------------------------------

**EDUCATION**

Have you had any post secondary education (including university, college or apprenticeship training)?  No  Yes

If you answered "yes", give full details of your highest level of post secondary education.

<b>1</b>	From	Field of study	School/Facility name	
	YYYY      00 MM			
	To	City/Town	Country	Province/State
	YYYY      00 MM		▼	▼

**EMPLOYMENT**

Give details of your employment for the past 10 years. If retired, not working, or studying, please indicate. If you are retired, provide the 10 years before your retirement.

<b>1</b>	From	Current Activity/Occupation	Company/Employer/Facility name	
	YYYY      00 MM			
	To	City/Town	Country	Province/State
	YYYY      00 MM		▼	▼
<b>2</b>	From	Previous Activity/Occupation	Company/Employer/Facility name	
	YYYY      00 MM			
	To	City/Town	Country	Province/State
	YYYY      00 MM		▼	▼
<b>3</b>	From	Previous Activity/Occupation	Company/Employer/Facility name	
	YYYY      00 MM			
	To	City/Town	Country	Province/State
	YYYY      00 MM		▼	▼

**BACKGROUND INFORMATION**

You must complete this section if you are 18 years of age or older.

<b>1</b>	a) Within the past two years, have you or a family member ever had tuberculosis of the lungs or been in close contact with a person with tuberculosis?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	b) Do you have any physical or mental disorder that would require social and/or health services, other than medication, during a stay	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	c) If you answered "yes" to question 1a) or 1b), please provide details and the name of the family member (if applicable).	
<b>2</b>	a) Have you ever previously applied for any visas (For example: Permanent Resident, Temporary Resident (Visitor, Student, Worker), Temporary Resident Permit)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	b) Have you ever been refused any kind of visa to travel to	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	c) Have you ever been refused admission or been ordered to leave or any other country?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	d) If you answered "yes" to question 2a), 2b), or 2c) please provide details.	

Applicant Name MD: Ataur Rahman Date of Birth 21-04-1980

BACKGROUND INFORMATION (CONTINUED)

3 Have you ever committed, been arrested for or been charged with any criminal offence in any country? [X] No [ ] Yes

4 a) Have you ever been in a military, militia or civil defence unit or the police? [X] No [ ] Yes

b) If you answered "yes" to question 4a), please provide dates of service and countries where you served.

[Empty box for providing dates of service and countries]

5 Have you ever been employed by a government in a security-related capacity? [X] No [ ] Yes

6 Have you ever held a position of authority in any government, or judiciary or a political party? [X] No [ ] Yes

7 Have you ever in periods of either peace or war, been involved in the commission of a war crime or crime against humanity, such as: willful killing, torture, attacks upon, enslavement, starvation or other inhumane acts committed against civilians or prisoners of war, or deportation of civilians? [X] No [ ] Yes

If you answered "yes" to any of questions 3 to 7 above, or upon request of a visa officer, you MAY BE REQUIRED to fill out IMM 5257 Schedule 1.

I consent to the release to Citizenship and Immigration Australia.....Border Services Agency Australia 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

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

MD: Ataur Rahman

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

28/09/2024

Date: YYYY-MM-DD



IMPORTANT NOTE:

This application must be signed and dated before it is submitted.

Do not forget to include: photos, fees (if applicable), and any other documents required by the visa office.

The information you provide on this form is collected under the authority of the Immigration and Refugee Protection Act to determine if you are admissible to Canada. It will be shared with the Information Bank CIC PPU 055, Visitor Case file. The information may be shared with other organizations such as the Border Services Agency, the Royal Canadian Mounted Police (RCMP), the Canadian Security Intelligence Service (CSIS) and foreign governments in accordance with the subsection 8(2) of the Privacy Act. In accordance with the Privacy Act and the Access to Information Act, individuals have a right to access their personal information. Details on these matters are available at the Infosource website (http://infosource.gc.ca) and through the Citizenship and Immigration Call Centre, Infosource.

