

Evaluation Form



1. Personal Information

- Full Name
- Gender
- Age
- Marital Status
- Do you have children?
- Email Address
- Cellphone Number
- Current Country of Residence
- **Preferred Country of Destination:**
 - 1)
 - 2)
 - 3)

2. Immigration/Education Goals

- **What are you interested in?**
 - ☐ Study Abroad
 - ☐ Work Abroad
 - ☐ Visit/Tourist Visa
 - ☐ Immigration/Permanent Residency
 - ☐ Other: _____

- **Please briefly describe your goals or situation:**
(e.g. study in Canada, pathway options in Spain, investment Programs, company registration in Italy, etc.)

3. Education & Work Background

- Highest Level of Completed Education
- Field of Study
- **Do you have work experience?**
 - ☐ Yes
 - ☐ No
 - If yes, please specify job title(s) and number of years

1)

2)

3)

4. Language Proficiency

- Have you taken any English, French or other language tests (e.g., IELTS, TOEFL, TEF, etc)?
 - ☐ Yes
 - ☐ No
 - If yes, please specify language and scores: _____

(e.g., IELTS Academic – Listening 7.5, Reading 7, Writing 6.5, Speaking 7)

5. Additional Information

- Do you have any relatives or friends in your destination country who hold permanent residency or citizenship?
- Any previous visa refusals (for any country)? If yes, explain.
- Did you complete your military service?
- Do you have any criminal record?
- Any other relevant information or questions for us?

Submit Your Form

A licensed professional from our team or a trusted partner will contact you after review.

 *Note: Completing this form does not constitute a client-consultant relationship*