ASSESSMENT OF SKILLED/ FAMILY VISAS TO MIGRATE TO AUSTRALIA

Simply complete the form below for a professional assessment for a Skilled or Family Visa by an Australian Registered Migration Agent.

Upon receiving duly completed form, I, as the migration Agent will contact you within 5 business days with your assessment appraisal.

Please ensure all details provided are accurate. I treat all information you provide as confidential.

*fields are required.

SECTION 1) -CONTACT DETAILS:

| First Name* | |
|--|--|
| Last Name* | |
| Email* | |
| Phone(home)* | |
| Phone(work) | |
| Fax | |
| Mobile | |
| Address* | |
| | |
| How did you find out about us? Please select | |
| from the following: | |
| Friends, | |
| Advertisement, | |
| Brochure, Others | |
| | |

SECTION 2) - PERSONAL DETAILS

| Date of Birth* | |
|-----------------------------------|--|
| Marital Status* (Married, Single, | |
| Divorce, De facto, Widowed) | |
| Number of Dependents (if any) * | |
| Country of Origin* | |
| English Level (High, Moderate, | |
| Basic)* | |
| Current Australian Visa (if any)* | |

AUS- ASIAN MIGARAITON & LEGAL CONSULTANTS

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SECTION 3) - BACKGROUND INFORMATION:

| Have you previously been to Australia? Yes or No?* | |
|---|--|
| Are you presently in Australia? Yes or No* | |
| If yes, what type of visa are you currently on? (Student, Visitor, Working Visa, etc.* | |
| What are the conditions on your visa? (These are numbered, for example 8108 4104, etc. on your visa)* | |
| Are you married? *Yes or No | |
| If Yes, their names and dates of birth. | |

SECTION 4) - DETAILS OF YOUR EDUCATIONAL QUALIFICATIONS:

| Farmal Ovalifications* | |
|---|--|
| Formal Qualifications* | |
| (Please select PhD, Masters Degree, Graduate Diploma, | |
| Graduate Certificate, Honors Degree, | |
| Bachelor Degree, Advanced Diploma, | |
| <u>Degree</u> /Diploma/Trade certificate | |
| What course did you study in?* | |
| | |
| Year Completed Studies * | |
| Country Studied | |
| Time Taken to Complete a CourseexactlyMonth/Year* | |
| What is the name of | |
| university/College/Secondary School, if any | |
| , , , , | |
| Did you study as a full-time student at the University? | |
| Yes or No | |
| | |
| Were you given credits for any previous studies undertaken in | |
| Australia or overseas? Yes or No | |
| Was the medium language | |
| of instruction for your course in English? | |
| Yes or No | |
| If Yes, please provide details | |
| | |
| - | |

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| What is the date that your | |
|--|--|
| Australian student visa will expire? | |
| | |
| If you do not reach the pass mark for the visa you wish to | |
| apply for, are you interested in applying for the Skilled | |
| Independent Regional Visa? This visa is a three year | |
| temporary visa where you live and work in a regional area of | |
| Australia. | |

SECTION 5) - EMPLOYMENT:

| Current Occupation* | |
|---|--|
| Length of Occupation in Current Field* | |
| Have You Worked Full Time | |
| for 3 of the Last 4 Years * | |
| (if "YES" please provide specific Occupation: ad duration) | |

SECTION 6) - SPOUSE DETAILS:

| First Name* | |
|---|--|
| Last Name* | |
| Date of Birth* | |
| Country of Origin* | |
| English Level (basic, Moderate, High) * | |
| Formal Qualifications | |
| (<u>Degree</u> /Diploma/Trade | |
| certificate* | |
| Year Completed Studies* | |
| Country Studied* | |
| Time Taken to Complete a Course* | |
| Current Occupation* | |
| Length of Occupation in Current | |
| Field* | |
| Have she/he Worked Full Time for | |
| 3 of the Last 4 Years* (if "YES" | |
| please provide specific Occupation: | |
| ad duration) | |

SECTION 7) - OTHER FAMILY:

| Do you have close relative in Australia* | |
|---|--|
| (if "yes" please indicate relationship | |
| otherwise please skip to Section 7 and /or 8 as appropriate and | |
| go to section 9) | |
| Relative's status* (i.e. Permanent Resident, Australian | |
| Citizen) | |

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| Relative's current location* | | | | |
|--|-----------|---------|----------|-----------|
| Length of Time spent in Australia by the | relative* | | | |
| SECTION 8) - BALANCE OF F "PARENT VISA"): | AMILY (| ONLY CO | MPLET. | E FOR |
| Number of children in Australia * | | | | |
| Number of children Outside Australia* | | | | |
| SECTION 9) - OTHER DETAIL | LS: | | | |
| Are you or your spouse the last remaining | _ | | | |
| relative in either family outside Australi Do you or any immediate family have ar | | | | |
| medical condition or take any medication | - | | | |
| (if "Yes" provide details)* | .1 | | | |
| Do you or any immediate family | | | | |
| have any police convictions* | | | | |
| (including suspended sentences) | | | | |
| (if "Yes" provide details) | | | | |
| Have you previously lodged a | | | | |
| Visa Application *(if "Yes" provide de | tails) | | | |
| Do you have any employment offers | | | | |
| from within Australia*(if "Yes" provide | details) | | | |
| Other Notes or Relevant information* | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| I agree that all the detail submitted as knowledge is true and correct. | of | .(date) | to the b | est of my |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

(Signature of the Applicant)

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