

QUESTIONNAIRE

Note: This form must be filled out separately by the main applicant, his/her spouse (if any), and all children aged 18 and over.

Note: All information in this form must be completed very accurately.

A. YOUR FULL NAME:

B. YOUR ADDRESS:

C. YOUR EMAIL:

D. YOUR PHONE NUMBER:

1- How many years have you studied at any of the under-age levels?

- Primary and secondary school:
- High School:
- University or Higher Education Center:
- Vocational training or other full-blown training:

- Enter the list of completed courses from high school diploma onwards in order **from new to old** in the table below. Insert dates into Gregorian.

The type of document issued can be one of the following:

Indicate the TOTAL number of years of studies; from elementary to university: _____

- High School Diploma
- Associate (or equivalent)
- Undergraduate (or undergraduate equivalent)
- Master (or master's equivalent)
- Ph.D.
- Postdoctoral
- Technical Career

Only provide information about your university and technical certificates.

4- In the table below, enter your government jobs and titles from new to old. These titles and occupations can include police officers, civil servants, judges, parliamentarians, prosecutors, etc.

Row	FROM		TO		Country	City	Organization Activities	Branch/Branch	Job Titles & Activities
	YY	M	YY	M					
1									
2									
3									
4									
5									

5- Enter the records of military service or service in the army or army (compulsory or cadre or voluntary) from new to old in the table below. Dates are AD. If you have military activity in more than one country, copy this table and write for each item in which country it was.

FROM		TO		Name of the organization (e.g. army)	Division (e.g. Air Force)	Unit name (e.g. battalion)	Commander's name	Category & Grade	History and Location of military conflict
YY	MM	YY	MM						

6- Mention your home addresses from the age of 18 to the present day from new to old in the table below (if you are 28 or older only mention the last 10 years). *Note that there is no space between dates. All dates are AD.*

HOME ADDRESS IN THE LAST 18 YEARS OF AGE		
FROM-TO (YY-MM)	Country-City	Address

7- Each member of the family needs to provide me their Height and Eye Color

NAME OF FAMILY MEMBERS:	HEIGHT:	EYE COLOR:

I (full name).....on (date)..... I have completed this form and certify that the completed information is accurate and fact-based.

CLIENT SIGNATURE