



CLIENT INFORMATION SHEET

DATE: _____ WHAT TYPE OF VISA YOU WISH TO APPLY: _____

BASIC INFORMATION	
FAMILY NAME	
GIVEN NAME	
SEX	
TELEPHONE NUMBER	
EMAIL ADDRESS	
CURRENT ADDRESS	
DATE OF BIRTH	
PLACE OF BIRTH	
DATE OF MARRIAGE (IF MARRIED)	
RELATIONSHIP STATUS	
OTHER NAMES YOU HAVE BEEN KNOWN	
PASSPORT NUMBER	
COUNTRY OF PASSPORT	
NATIONALITY	
PLACE OF ISSUE/ISSUING AUTHORITY	
TRAVELLED TO AUSTRALIA ON THIS PASSPORT?	
COUNTRY OF CITIZENSHIP	
CITIZENSHIP ACQUIRED BY (EG. BY BIRTH)	
CITIZENSHIP GRANT DATE	
NATIONAL ID NUMBER	

PREVIOUS TRAVELS TO AUSTRALIA

DATE FROM	
DATE TO	
TYPE OF VISA	
PLACE WHERE ISSUED	
REASON FOR VISIT	

LIST OF TRAVELS TO ANY COUNTRY WITHIN THE LAST 10 YRS

COUNTRY	FROM	TO	REASON FOR VISIT

INFORMATION OF FAMILY MEMBERS

NAME	DOB	PASSPORT	MIGRATING?

HEALTH DECLARATIONS

HEALTH PROBLEMS	MEDICATIONS	STATUS

CHARACTER DECLARATION

ISSUES	DATE	STATUS

I hereby declare that the above information is true and correct.

I give Republic Migration International the consent to store my personal information for Visa application purposes.

NAME OF APPLICANT

SIGNATURE

DATE

CHECKLIST:

1. Passport
2. Resume
3. Visa Grant
4. Educational Qualifications Documents
5. Professional Qualifications Documents