

# Initial Assessment Questionnaire



	Principal applicant	Spouse	Child 1	Child 2	Child 3	Child 4
Family Name						
Given Names						
Age						
Date of Birth						
Place of Birth						
Current Residence						
Marital Status						
Occupation						
<b>Tertiary Qualifications</b>						
Name of course completed						
Name of institution						
Course duration						
English language ability						
<b>Employment (past 8 years)</b>						
Employer name						
Position						

<b>Contact details</b>			
Physical address		Business Phone	
		Home Phone	
Postal address		Cell Phone	
		Email	

Medical Check Satisfactory	Yes / No
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Character Reference Satisfactory	Yes / No
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Details of family / business connections in Australia	
Name	
Relationship to Applicant	
Address	
Period of residence in Australia	
Occupation in Australia	

Other details	
Previous visits to Australia	
Details of any special experience, training (business, sport, other)	
Any exceptional talents	
Other information	
Details of any special experience, training (business, sport, other)	

### Details of business or investment activities

	Business 1		Business 2		Total		OFFICE USE ONLY	
	Local Currency	AUD	Local Currency	AUD	Local Currency	AUD	Yr 1 Points	Yr 2 Points
Name								
Type of business/investment								
Shareholding/position								
Date commenced								
Financial year end								
Annual Turnover – Last year								
Previous year								
Net Business Asset Value								
Last year								
Previous year								
Personal and Investment NET asset value (not included above)								
Last Year								
Previous year								
Exchange Rate Used – Last year								
Previous year								

Details of proposed business activities in Australia:	Details of registered trademarks, patents or export trade (> 50% of turnover):

Please return completed questionnaire by email to [ivan@imcmigration.com](mailto:ivan@imcmigration.com)

Office Use Only			
Total Points		Category	
Engagement Letter issued		Fee	
List of Docs.		Interviewed by	
Date			