



Skilled Migration Assessment Form

PLEASE TYPE THE REQUESTED INFORMATION INTO THE FORM USING ADOBE READER

1. Main Applicant's Personal Details

* Indicates required field

* First Name	<input type="text"/>	* Family Name	<input type="text"/>
* Date of Birth (dd/mm/yyyy)	<input type="text"/>	* Email	<input type="text"/>
* Nationality	<input type="text"/>	* Country	<input type="text"/>
* Telephone	<input type="text"/>	Mobile	<input type="text"/>
* Address	<input type="text"/>	Fax	<input type="text"/>
* Marital Status (please choose one)	<input type="radio"/> Married <input type="radio"/> De facto <input type="radio"/> Never Married <input type="radio"/> Divorced <input type="radio"/> Widowed <input type="radio"/> Separated		
* Preferred Method of Contact	<input type="radio"/> Email <input type="radio"/> Tel/Mob <input type="radio"/> Fax <input type="radio"/> Mail		
* Main Applicant is	<input type="radio"/> in Australia <input type="radio"/> outside Australia		

2. Educational Background: Post Secondary Qualifications (including apprenticeship, college, university)

* Name of Course	<input type="text"/>	* Name of Institution	<input type="text"/>
* Course Start Date (dd/mm/yyyy)	<input type="text"/>	* Country of Institution	<input type="text"/>
* Date of Completion (dd/mm/yyyy)	<input type="text"/>	* Major	<input type="text"/>
* <input type="radio"/> Full time <input type="radio"/> Part time	* Length of Course Months <input type="text"/> Years <input type="text"/>		

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* Course Start Date (dd/mm/yyyy)	<input type="text"/>	* Country of Institution	<input type="text"/>
* Date of Completion (dd/mm/yyyy)	<input type="text"/>	* Major	<input type="text"/>
* <input type="radio"/> Full time <input type="radio"/> Part time	* Length of Course Months <input type="text"/> Years <input type="text"/>		



Shada Migration and International Recruitment Agency

Unit 18, 2nd Fl, No 1402, Parsin Business Complex,
Gholhak Intersection, Shariati Street
Tehran, Iran

Telephone: (+98) (21) 26409946
Email: info@shadvisa.com
www.shadvisa.com

* Name of Course	<input type="text"/>	* Name of Institution	<input type="text"/>
* Course Start Date (dd/mm/yyyy)	<input type="text"/>	* Country of Institution	<input type="text"/>
* Date of Completion (dd/mm/yyyy)	<input type="text"/>	* Major	<input type="text"/>
* <input type="radio"/> Full time <input type="radio"/> Part time		* Length of Course	Months <input type="text"/> Years <input type="text"/>

3. Employment History

* Company's Name	<input type="text"/>	* Your Job Title	<input type="text"/>
* Start Date (dd/mm/yyyy)	<input type="text"/>	* Finish Date (dd/mm/yyyy)	<input type="text"/>
* Company's Address	<input type="text"/>	* <input type="radio"/> Full time <input type="radio"/> Part time	
Duties	<input type="text"/>		
How long have you been working in this occupation?	Month <input type="text"/>	Year <input type="text"/>	

* Company's Name	<input type="text"/>	* Your Job Title	<input type="text"/>
* Start Date (dd/mm/yyyy)	<input type="text"/>	* Finish Date (dd/mm/yyyy)	<input type="text"/>
* Company's Address	<input type="text"/>	* <input type="radio"/> Full time <input type="radio"/> Part time:	
Duties	<input type="text"/>		
How long have you been working in this occupation?	Month <input type="text"/>	Year <input type="text"/>	

If you have worked for more than two companies, please write the information in Section 11 "Additional Information".



4. English Language Ability

* Is English your first language ? Yes No

* Have you sat for any official English Test in the last 36 months? No. Go to next question

Yes IELTS: Yes TOFEL IBT Yes OET Yes PTE Yes CAE

* If yes, please write your scores below

Listening Reading Speaking Writing Overall Band Score

5. Partner's Personal Details

* First Name

* Family Name

* Date of Birth (dd/mm/yyyy) * Email

* Nationality * Telephone

Mobile Fax

6. Partner's Educational Background : Post Secondary Qualifications (including apprenticeship, college, university)

* Name of Course * Name of Institution

* Course Start Date (dd/mm/yyyy) * Country of Institution

* Date of Completion (dd/mm/yyyy) * Major

* Full time Part time * Length of Course Months Years

* Name of Course * Name of Institution

* Course Start Date (dd/mm/yyyy) * Country of Institution

* Date of Completion (dd/mm/yyyy) * Major

* Full time Part time * Length of Course Months Years



7. Partner's Employment History (if applicable)

* Company's Name	<input type="text"/>	* Job Title	<input type="text"/>
* Start Date (dd/mm/yyyy)	<input type="text"/>	* Finish Date (dd/mm/yyyy)	<input type="text"/>
* Company's Address	<input type="text"/>		
	* <input type="radio"/> Full time <input type="radio"/> Part time		
Duties	<input type="text"/>		

* Company's Name	<input type="text"/>	* Job Title	<input type="text"/>
* Start Date (dd/mm/yyyy)	<input type="text"/>	* Finish Date (dd/mm/yyyy)	<input type="text"/>
* Employer's Address	<input type="text"/>		
	* <input type="radio"/> Full time <input type="radio"/> Part time		
Duties	<input type="text"/>		

8. Partner's English Language Ability

* Is English your partner's first language? Yes No

* Has your partner sat for any English language test in the last 36 months? No. Go to next question

Yes IELTS Yes TOFEL IBT Yes OET Yes PTE Yes CAE

* If yes, please write your scores below

Listening Reading Speaking Writing Overall Band Score



9. Relatives in Australia (Main Applicant or Partner's)

Do you have relative who is Australian Citizen or Permanent Resident ? No. Go to next question Yes- please continue :

* Relative's Name: Family Relationship (e.g. brother, aunt)

* Which State / Territory does your relative live in Australia (i.e NSW) ?

* Relative of: Main Applicant Partner

* Years of residence in Australia

More Relatives ? Yes- please provide details in section 11 "Additional Information"

10. Other Family Members

Do you have any children ? No. Go to next question Yes - please provide details of your children

Name	Date of Birth (dd/mm/yyyy)	Relationship to you	Nationality
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

11. Additional Information

Please include any further information such as special skills, immigration history, other language ability, licenses , skills ,etc



Instructions

1. Save a copy of this form on your computer hard disk.
2. Email the completed form as an attachment to info@shadvisa.com
3. You may print the form for your own record if you wish
4. Please note that you can use Adobe Reader to fill out this form.

Terms and conditions

Once you have submitted the form, we will be in contact with you via your preferred method of contact. Usually the process of our assessment takes 5 working days.

By submitting this form, you certify that the information provided is true and correct. If our assessment shows that we can help you with your visa application, then we will outline in details what steps to take to prepare for skilled visa including our services and fees.

Please note that Shada Migration and International Recruitment Agency will use this information to provide you with an initial Skilled Migration Assessment, which does not guarantee your migration to Australia.

Privacy

Shada Migration and International Recruitment Agency is aware of the importance of preserving complete confidentiality.

Any personal information and/or business proprietary material that you have disclosed to us will be treated with strict confidentiality and only be used for the intended purpose. Shada Migration and International Recruitment Agency will not accept any responsibility for an assessment or subsequent visa application made from information which is untrue or misleading in any way.

Declaration

I declare that the information I have supplied in this form is complete, correct and up-to-date in every detail

Name

Date