CANADIAN IMMIGRATION SERVICE

Report of Admissions and Rejections at the Port of ____ for the Month ending ____ 19__

Admitted
Rejected
(Total)

LINE	DAY OF MONTH	FAMILY NAME (PRINT NAME IN BLOCK LETTERS. FAMILY NAME FIRST)	GIVEN NAME	RELATIONSHIP	AGE M.	AGE F.	SINGLE, MARRIED, WIDOWED OR DIVORCED	OCCUPATION (WHAT TRADE OR OCCUPATION HAVE YOU FOLLOWING IN CANADA)	REMARKS (INDICATE WHICH ARE SUITABLE INFORMATIVE ENTRIES AS U.S. BORDER PORTS, E.G. GIVE MEDICAL CERTIFICATE NUMBERS AND PASSPORT ENDORSEMENTS SEE CIRCULAR NO. 47)
1	22	33		44	55	66	77		
11									
22									
33									
44									
55									
66									
77									
88									
99									
100									
111									
122									
133									
144									
155									
166									
177									
188									
199									
200									

OCCUPATION

CODE	WHAT TRADE OR OCCUPATION HAVE YOU FOLLOWING IN CANADA?