



# BC Newcomer Services Program (BCNSP)

## Client Intake Form

Date: \_\_\_\_\_

### Client Information:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Native Language: \_\_\_\_\_

Date of Arrival-Canada: \_\_\_\_\_

Permit Expire Date: \_\_\_\_\_

### The Highest Level of Education Completed:

High School     Diploma/Certificate

Bachelor's     Master's     PhD

Field of Study: \_\_\_\_\_

Current Occupation **in Canada:** \_\_\_\_\_

### Emergency Contact

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### Interested Services:

- Settlement Services
- Community Connection
- Immigration Application Information
- Short-term Non-clinical Counseling
- Labour Market Services
- Support related to workplace issue
- English Language Training [ \_\_\_\_\_ ]\*

Subscribe to receive upcoming workshops info.

Others

### Original Immigration Status:

\_\_\_\_\_

### Current Immigration Status:

\_\_\_\_\_

### **Family Member:**

First Name	Last Name	Gender	Age	Relationship	In Canada	Status in Canada

\*Intake done by \_\_\_\_\_ | Services Provided in:  English  Others \_\_\_\_\_ (\*BCNSP staff use only)