GCMS Information Request: Application

Request Identifier: **2A-2023-46445** s.19(1)
Request Date: **2024/02/23**

APPLICATION: W308908167

Created Date: **2023/10/03**
Updated Date: **2023/11/03**
Primary Office: **Accra**
Secondary Office: **RROC**
App #: **W308908167**
App Status: **Closed**
App Status Reason: **Refused**
Rec'd Date: **2023/10/03**
Rec'd Via: **On-line**
Category: **WP**
Subcategory:
NOC Version: **NOC 2021**
Counterfoil Category: **W-1**
Case Type: **20**
Restoration: **N**
Special Program(s):
Special Event:
Ministerial Instructions:
Correspond Lang: **English**
Cost Recovery: **Complete**
Overpayment: **N**
Restricted Notes: **N**
High Profile: **N**
Prospective App Delete Date:
Preferred Correspondence Channel: **Online**
Name: **Nguere Mikue, Angel Serafin Ondo**
DOB: **1995/01/31**
Travel Doc Expiry: **2028/07/12**
# of Entries: **MULTIPLE**
CAQ #:
CAQ Valid To:
Province of Destination: **UNK**
City of Destination: **Unknown**
Available Funds (CAD):
Stay/Program - From Date:
Stay/Program - To Date:
Travel Itinerary:
FOSS Doc #:
Associated App:
Pre-Assessment Notes:

BIOMETRICS
IRCC #:**1000013742010**
Assessment: **Complete**
Other Description:
Info: **Received - NRT**
Review:

TRV
Purpose of Visit:
Other Description:

ADMISSIBILITY REQUEST(S)

GCMS Information Request: Application

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**

MED: **N**
VIT34: **N**
VIT35: **N**
VIT37: **N**

STUDY PERMIT
School:
DLI Name:
Level of Study:
Authorization Level:
Field of Study:
Compliance Verification:
Year of Study:
Length of Study:
Tuition (CAD):
Room & Board (CAD):
Other Costs (CAD):
Expenses Paid:
Other Description:
WP Required:
Funding Program Name:
Money Received (CAD):

WORK PERMIT
Exemption Code: **C41**
NOC: **99999**
Intended Occupation: **Open**
Salary (CAD):
LMIA/LMIA Exempt #:
Employer: **Open**
Type of Care:
Requiring Care:

ASSESSMENTS
Eligibility: **Failed**
Security:
HIRV:
Criminality: **Passed - Bio**
Org Crime:
Medical:
Misrep:
Other Req:
Info Sharing: **Complete**
Final: **Refused**
Counterfoil Req: **Y**

PAPER FILE
Office:
#:
Location:

CASE TYPE
CASE TYPE: **1**
Type: **WP**

GCMS Information Request: Application

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**

Case Type: **20**
Description: **Usual worker case type**

SPECIAL PROGRAM
SPECIAL PROGRAM: **0**

TYPE OF CARE
TYPE OF CARE: **0**

CLIENT DETAILS

CLIENT DETAILS: **1**
Created Date: **2023/10/03**
Updated Date: **2023/10/04**
UCI/Party ID: **1128440119**
Client/Party: **PA**
Relationship:
Other Relationship Descrip:
Name: **Nguere Mikue, Angel Serafin Ondo**
Gender: **Male**
DOB: **1995/01/31**
Effective Date: **2023/10/03**
Expiry Date:
Citizenship(s): **Equatorial Guinea**
CoR: **Equatorial Guinea**
Place of Birth (City/Town): **Mbini Mangola Anvom**
Country of Birth: **Equatorial Guinea**
Marital Status: **Common-Law**
Background Info: **N**
Travel Doc #: **P10075106**
Travel Doc Expiry Date: **2028/07/12**
Travel Doc Country of Issue: **Equatorial Guinea**
Official Language: **French**
Can Communicate in English: **No**
Can Communicate in French: **Yes**
Official Language Proficiency Test: **No**

Non Canadian Visa
#:
Country of Issue:

ADDRESS
Type: **Mailing**
Country: **Canada**
Apartment #:
Street #: **11112**
Street Address: **82 Ave NW**
Street Address 2:
PO Box:
City/Town: **Edmonton**
Province/State: **AB**
District:

GCMS Information Request: Application

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**

s.19(1)

Postal/Zip Code: **T6G 2L8**
Telephone #: **7807611836**
Fax #: **8664817676**
E-mail: **info@symyimmigration.com**

PARTY DETAILS

PARTY DETAILS: **1**
Created Date: **2012/05/14**
Updated Date: **2024/02/14**
UCI/Party ID:
Client/Party: **Paid Rep**
Relationship:
Other Relationship Descrip:
Name: **Baram, Marty**
Gender: **Male**
DOB:
Effective Date: **2023/10/03**
Expiry Date:

AUTHORIZED REPRESENTATIVE
Status: **CICC**
Province/Territory:
Membership #: **R506879 - INCORRECT**
Expiry Date: **2023/11/06**

ADDRESS
Type: **Residence**
Country: **Canada**
Apt/Unit #: **na**
Street #: **na**
Street Address: **11112 - 82 AVE**
Street Address 2:
PO Box:
City/Town: **Edmonton**
Province/State: **AB**
District:
Postal Code: **T6G 2L8**
Telephone #: **7807611836**
Fax #: **8664817676**
E-mail: **info@symyimmigration.com**

ELIGIBILITY

IEC

IEC: **0**

ADMISSIBILITIES

SECURITY

SECURITY: **0**

HIRV
HIRV: **0**

GCMS Information Request: Application

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**

CRIMINALITY
CRIMINALITY: **1**
Created Date: **2023/10/03**
Updated Date: **2023/10/23**
UCI #: **1128440119**
Family Name: **Nguere Mikue**
Given Name: **Angel Serafin Ondo**
Type: **Criminality**
Status: **Passed - Bio**
Validity Date:
Status Updated Date: **2023/10/23**

ATTACHMENTS
ATTACHMENTS: **0**

CRIMINALITY HISTORY
CRIMINALITY HISTORY: **0**

POLICE CERTIFICATES
POLICE CERTIFICATES: **0**

SUB ACTIVITIES
SUB ACTIVITIES: **1**
Created Date: **2023/10/03**
Updated Date: **2023/10/23**
UCI #: **1128440119**
Family Name: **Nguere Mikue**
Given Name: **Angel Serafin Ondo**
Type: **Biometrics - RCMP**
Country:
Status: **Received - NRT**
Validity Date:
Status Updated Date: **2023/10/23**
Due Date: **2023/10/18**

BIOMETRICS
Previous Result:
RCMP Purge:
Biometrics #: **00104420231023085851**
Biometrics Review:

ENROLMENT:
IRCC #:**1000013742010**
Biometrics #: **00104420231023085851**
Location: **Yaounde VFS VAC**
Name: **CMYAO-VFS**
Country: **Cameroon**
Code: **1-2FQR-13**

GCMS Information Request: Application

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**
Type: **VAC**
Date: **10/23/2023 04:01:20**
By: **bd7d6b4fc620d37a3d73**

FINGERPRINT EXCEPTIONS: **0**

Fingerprint Quality: **Good**
UCI/FOSS ID:
Photo: **Y**

RCMP RESULTS:
New IID: **Y**
IID: **500011339805**
Ref #:
New FPS #: **N**
FPS #:
UCI/FOSS ID:
RCMP #: **12329606892392525101**

NAME(S): **1**
Name(s):
- Name: **NGUERE MIKUE, ANGEL SERAFIN ONDO**
- DOB: **1995/01/31**
- Gender: **Male**
- Country of Birth: **Equatorial Guinea**
- Source: **CIBIDS**

NAME(S): **2**
Name(s):
- Name: **NGUERE MIKUE, ANGEL SERAFIN ONDO**
- DOB: **1995/01/31**
- Gender: **Male**
- Country of Birth: **Unknown**
- Source: **RCMP**

Narrative:
Search Date: **10/23/2023**

FBI RESULTS:
FBI #:
Name(s): **0**
Narrative:
Search Date:

INTERNATIONAL RESULTS:
Reference #:
Narrative:

PURGE:
Status Updated Date:

ORGANIZED CRIME
ORGANIZED CRIME: **0**

GCMS Information Request: Application

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**

MEDICAL
MEDICAL: **0**

MISREPRESENTATION
MISREPRESENTATION: **0**

MINISTERIAL RELIEF
MINISTERIAL RELIEF: **0**

INFO SHARING
INFO SHARING: **1**
Created Date: **2023/10/04**
Updated Date: **2023/10/23**
UCI #: **1128440119**
Family Name: **Nguere Mikue**
Given Name(s): **Angel Serafin Ondo**
Client/Party: **PA**
Relationship:
Type: **Biometric - FCC**
Partner: **USA**
Status: **NRT**
Validity Date: **2024/01/21**
Status Updated Date: **2023/10/23**
Due Date: **2023/10/05**

Correction Ref #:
Correction Date:
Urgent: **N**

MATCHED RECORDS

REQUEST INFO
Family Name:
Given Name(s):
DOB:
Visa #:
Travel Doc #:
Travel Doc Country of Issue:

RESPONSE INFO
Doc Validity:
Doc Status:
Match Type:

ATTACHMENTS
ATTACHMENTS: **0**
INFO SHARING: **2**
Created Date: **2023/10/04**
Updated Date: **2023/10/04**
UCI #: **1128440119**
Family Name: **Nguere Mikue**
Given Name(s): **Angel Serafin Ondo**

GCMS Information Request: Application

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**

Client/Party: **PA**
Relationship:
Type: **Biographic**
Partner: **USA**
Status: **NRT**
Validity Date:
Status Updated Date: **2023/10/04**
Due Date: **2023/11/03**

Correction Ref #:
Correction Date:
Urgent: **N**

MATCHED RECORDS

REQUEST INFO
- Family Name:
- Given Name(s):
- DOB:
- Visa #:
- Travel Doc #:
- Travel Doc Country of Issue:

RESPONSE INFO
- Doc Validity:
- Doc Status:
- Match Type:

ATTACHMENTS
- ATTACHMENTS: **0**

FINALIZE APPLICATION

DOCUMENT ISSUANCE
- DOCUMENT ISSUANCE: **0**

REFUSAL GROUNDS LEGACY
- REFUSAL GROUNDS LEGACY: **0**

REFUSAL GROUNDS
- REFUSAL GROUNDS DETAILS: **1**
- Created Date: **2017/05/24**
- Updated Date: **2022/06/09**
- Refusal Grounds: **R179(b) Assets**
- Print Sequence: **1**
- Description: **Your assets and financial situation are insufficient to support the stated purpose of travel for yourself (and any accompanying family member(s), if applicable).**
- Comments:
- Expiry Date:

- REFUSAL GROUNDS DETAILS: **2**
- Created Date: **2017/05/24**
- Updated Date: **2017/05/24**

GCMS Information Request: Application

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**

Refusal Grounds: **R179(1)b)**
Print Sequence: **2**
Description: **I am not satisfied that you will leave Canada at the end of your stay as a temporary resident, based on the length of your proposed stay in Canada.**
Comments:
Expiry Date:

REFUSAL LETTER DETAILS

REFUSAL LETTER DETAILS: **1**
Created Date: **2017/05/24**
Created By: **RC01989**
Updated Date: **2017/05/24**
Updated By: **SADMIN**
Description: **Thank you for your interest in working in Canada. After careful review of your work permit application and supporting documentation under the International Mobility Program, I have determined that your application does not meet the requirements of the Immigration and Refugee Protection Act (IRPA) and Immigration and Refugee Protection Regulations (IRPR). I am refusing your application on the following grounds:**
Paragraph Type: **Refusal Letter Intro**
Selected: **Y**

APPEALS AND LITIGATION

IAD

IMMIGRATION APPEALS DIVISION: **0**

LITIGATION

LITIGATION: **0**

OTHER REQS

A39/A41

A39/A41: **0**

VERIFICATION

VERIFICATION: **0**

EVENTS

EVENTS: **0**

EMPLOYMENT DETAILS

LMIA EXEMPT

LMIA EEXMPT: **0**

NOTES

NOTES

NOTES: **1**
Created Date: **2023/11/01**

GCMS Information Request: Application

s.19(1)

Request Identifier: **2A-2023-46445**
Request Date: **2024/02/23**

Updated Date: **2023/11/01**
Restricted: **N**
Label: **General**
Office: **Accra**
Text: **Spouse/mother issued Work Permit**

Spouse declared herself in common-law relationship with one non-accompanying child. Relationship established on basis of child's birth certificate.

Subject works in super-market as cashier – no evidence of funds provided on his end.

I am not satisfied, based on spouse's limited savings, that family has sufficient funds for their stay in Canada.

Application refused.

NOTES: **2**
Created Date: **2023/10/05**
Updated Date: **2023/10/05**
Restricted: **N**
Label: **General**
Office: **RROC**
Text: **RROC Mission Support application pre-check completed. / CORR Soutien aux missions a complété le polissage de cette demande.**

NOTES: **3**
Created Date: **2023/10/03**
Updated Date: **2023/10/03**
Restricted: **N**
Label: **General**
Office: **GCMS-System**
Text: **Signed By / Signé Par: Marty, Baram (10/03/2023)**