

PROTECTED "B" / PROTÉGÉ "B"

GCMS Information Request: Application

Request Identifier: **2A-2023-75286**

Request Date: **2024/03/20**

s.19(1)

APPLICATION: W309564565

Created Date: **2023/12/31**

Updated Date: **2024/03/06**

Primary Office: **CORR**

Secondary Office: **Nairobi**

App #: **W309564565**

App Status: **Closed**

App Status Reason: **Refused**

Rec'd Date: **2023/12/31**

Rec'd Via: **On-line**

Category: **PT**

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: **OGUNLADE, OLUWASEYI**

DOB: **1991/02/05**

Travel Doc Expiry: **2031/03/18**

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 #: **1000015314316**

Assessment: **Complete**

Other Description:

Info: **Received - NRT**

Review:

TRV

Purpose of Visit:

Other Description:

ADMISSIBILITY REQUEST(S)

User ID/ID utilisateur: **MR28318_BOT**

Date Generated / Date d'exécution: **2024/03/20**

GCMS/SMGC

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PROTECTED "B" / PROTÉGÉ "B"

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Request Identifier: **2A-2023-75286**

Request Date: **2024/03/20**

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: **C42**
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: **Passed**
Misrep:
Other Req:
Info Sharing: **Complete**
Final: **Refused**
Counterfoil Req: **Y**

PAPER FILE

Office:
#:
Location:

CASE TYPE

CASE TYPE: **1**
Type: **PT**

User ID/ID utilisateur: MR28318_BOT
Date Generated / Date d'exécution: 2024/03/20

GCMS/SMGC

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PROTECTED "B" / PROTÉGÉ "B"

GCMS Information Request: Application

Request Identifier: **2A-2023-75286**

Request Date: **2024/03/20**

Case Type: **20**

Description: **Cas de travailleur habituel**

SPECIAL PROGRAM

SPECIAL PROGRAM: **0**

TYPE OF CARE

TYPE OF CARE: **0**

CLIENT DETAILS

CLIENT DETAILS: **1**

Created Date: **2022/04/21**

Updated Date: **2024/03/06**

UCI/Party ID: **1121671817**

Client/Party: **PA**

Relationship:

Other Relationship Descrip:

Name: **OGUNLADE, OLUWASEYI**

Gender: **Male**

DOB: **1991/02/05**

Effective Date: **2023/12/31**

Expiry Date:

Citizenship(s): **Nigeria**

CoR: **Nigeria**

Place of Birth (City/Town): **LAGOS**

Country of Birth: **Nigeria**

Marital Status: **Married**

Background Info: **Y**

Travel Doc #: **B50078940**

Travel Doc Expiry Date: **2031/03/18**

Travel Doc Country of Issue: **Nigeria**

Official Language: **English**

Can Communicate in English: **Yes**

Can Communicate in French: **No**

Official Language Proficiency Test: **No**

Non Canadian Visa

#:

Country of Issue:

ADDRESS

Type: **Mailing**

Country: **Canada**

Apartment #: **#301**

Street #: **246**

Street Address: **Davis Place**

Street Address 2:

PO Box:

City/Town: **Kamloops**

Province/State: **BC**

District:

PROTECTED "B" / PROTÉGÉ "B"

GCMS Information Request: Application

Request Identifier: **2A-2023-75286**

Request Date: **2024/03/20**

Postal/Zip Code: **V2C 2C9**

Telephone #: **7782575508**

Fax #:

E-mail: **mkj@siaimmigration.com**

PARTY DETAILS

PARTY DETAILS: **0**

ELIGIBILITY

IEC

IEC: **0**

ADMISSIBILITIES

SECURITY

SECURITY: **0**

HIRV

HIRV: **0**

CRIMINALITY

CRIMINALITY: **1**

Created Date: **2023/12/31**

Updated Date: **2024/01/01**

UCI #: **1121671817**

Family Name: **OGUNLADE**

Given Name: **OLUWASEYI**

Type: **Criminality**

Status: **Passed - Bio**

Validity Date:

Status Updated Date: **2024/01/01**

ATTACHMENTS

ATTACHMENTS: **0**

CRIMINALITY HISTORY

CRIMINALITY HISTORY: **0**

POLICE CERTIFICATES

POLICE CERTIFICATES: **0**

SUB ACTIVITIES

SUB ACTIVITIES: **1**

Created Date: **2023/12/31**

Updated Date: **2024/01/01**

UCI #: **1121671817**

Family Name: **OGUNLADE**

Given Name: **OLUWASEYI**

Type: **Biometrics - RCMP**

Country:

Status: **Received - NRT**

Validity Date:

Status Updated Date: **2024/01/01**

Due Date: **2024/01/15**

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Request Date: **2024/03/20**

BIOMETRICS

Previous Result:

RCMP Purge:

Biometrics #: **00037220220509144846**

Biometrics Review:

ENROLMENT:

IRCC #: **1000008233133**

Biometrics #: **00037220220509144846**

Location: **Lagos VFS VAC**

Name: **NGLOS-VFS**

Country: **Nigeria**

Code: **1-2FVS-277**

Type: **VAC**

Date: **05/09/2022 09:51:16**

By: **a0ec436fe21b9a8aa217**

FINGERPRINT EXCEPTIONS: 0

Fingerprint Quality: **Good**

UCI/FOSS ID:

Photo: **Y**

RCMP RESULTS:

New IID: **Y**

IID: **500006645822**

Ref #:

New FPS #: **N**

FPS #:

UCI/FOSS ID:

RCMP #: **12212906892419070104**

NAME(S): 1

Name(s):

Name: **OGUNLADE, OLUWASEYI**

DOB: **1991/02/05**

Gender: **Male**

Country of Birth: **Nigeria**

Source: **CIBIDS**

NAME(S): 2

Name(s):

Name: **OGUNLADE, OLUWASEYI**

DOB: **1991/02/05**

Gender: **Male**

Country of Birth: **Unknown**

Source: **RCMP**

Narrative:



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Request Identifier: **2A-2023-75286**

Request Date: **2024/03/20**

Search Date: **05/09/2022**

FBI RESULTS:

FBI #:

Name(s): **0**

Narrative:

Search Date:

INTERNATIONAL RESULTS:

Reference #:

Narrative:

PURGE:

Status Updated Date:

ORGANIZED CRIME

ORGANIZED CRIME: **0**

MEDICAL

MEDICAL: **1**

Created Date: **2024/03/06**

Updated Date: **2024/03/06**

UCI: **1121671817**

Family Name: **OGUNLADE**

Given Name: **OLUWASEYI**

Type: **Medical**

Status: **Passed**

Validity Date: **2022/09/08**

Status Updated Date: **2024/03/06**

Due Date: **2024/03/21**

IME #: **17688701**

IME Type: **Standard**

Streamlined IME Rationale:

UMI: **U006407792**

Assessed For: **All**

IME Status Reason: **Granted**

RMO: **London**

M Profile: **1**

Description: **No health impairment sufficient to prevent admission for medical reasons under Section 38(1)(a)**

S: **1**

Description: **No surveillance required.**

MOF Rationale Exists: **N**

MOF Review:

Valid Until: **2022/09/09**

IMM Type: **Non EDE**

UMI Type: **Worker**

Expected Date of Delivery:

MISREPRESENTATION

MISREPRESENTATION: **0**



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MINISTERIAL RELIEF

MINISTERIAL RELIEF: **0**

INFO SHARING

INFO SHARING: **1**

Created Date: **2024/01/01**

Updated Date: **2024/01/01**

UCI #: **1121671817**

Family Name: **OGUNLADE**

Given Name(s): **OLUWASEYI**

Client/Party: **PA**

Relationship:

Type: **Biometric - FCC**

Partner: **USA**

Status: **NRT**

Validity Date: **2024/03/31**

Status Updated Date: **2024/01/01**

Due Date: **2024/01/02**

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: **2024/01/01**

Updated Date: **2024/01/01**

UCI #: **1121671817**

Family Name: **OGUNLADE**

Given Name(s): **OLUWASEYI**

Client/Party: **PA**

Relationship:

Type: **Biographic**

Partner: **USA**

Status: **NRT**

Validity Date:

Status Updated Date: **2024/01/01**



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Due Date: **2024/01/31**

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: **2022/06/16**

Refusal Grounds: **R200(1)(b) Intro Paragraph**

Print Sequence: **1**

Description: **I am not satisfied that you will leave Canada at the end of your stay as required by paragraph 200(1)(b) of the IRPR (<https://laws.justice.gc.ca/eng/regulations/SOR-2002-227/section-200.html>). I am refusing your application because you have not established that you will leave Canada, based on the following factors:**

Comments:

Expiry Date:

REFUSAL GROUNDS DETAILS: **2**

Created Date: **2017/05/24**

Updated Date: **2022/06/09**

Refusal Grounds: **R200(1)(b) Assets**

Print Sequence: **2**

Description: **The compensation (monetary or other) indicated in your job offer and your assets and financial situation are insufficient to support the stated purpose of travel for yourself (and any accompanying family member(s), if applicable).**

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Request Date: **2024/03/20**

Comments:

Expiry Date:

REFUSAL LETTER DETAILS

REFUSAL LETTER DETAILS: **1**

Created Date: **2017/05/24**

Created By: **AE32614**

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: **2024/03/12**

Updated Date: **2024/03/12**

Restricted: **N**

Label: **General**

Office: **Montréal - Télécentre national**

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Text: **MCMPMS-M contacted Sarah from the office of Bittle, Chris. Status Enquiry (no action). Provided refusal reasons . Ticket 1298460. JA5204**

NOTES: **2**

Created Date: **2024/03/06**

Updated Date: **2024/03/06**

Restricted: **N**

Label: **General**

Office: **CORR**

Text: **Please refund OWP fee.**

NOTES: **3**

Created Date: **2024/03/06**

Updated Date: **2024/03/06**

Restricted: **N**

Label: **General**

Office: **CORR**

Text: **I have reviewed the application.**

I have considered the following factors in my decision.

Application reviewed. Applicant has applied for an open work permit and intends to join their spouse in Canada. Limited proof of funds on file, First Bank statement provided by PA show lump sum deposit, no provenance on file. I am not satisfied funds are sufficient to support both spouse and applicant during their stay in Canada. Application refused as per R200(1)(b).

Weighing the factors in this application. I am not satisfied that the applicant will depart Canada at the end of the period authorized for their stay.

For the reasons above, I have refused this application.

NOTES: **4**

Created Date: **2024/03/06**

Updated Date: **2024/03/06**

Restricted: **N**

Label: **General**

Office: **CORR**

Text: **Indicator: N/A**

Processing Priority Word Flag: N/A

NOTES: **5**

Created Date: **2024/03/06**

Updated Date: **2024/03/06**

Restricted: **N**

Label: **General**

Office: **CORR**

Text: **File processed with the assistance of Chinook 3+ / Dossier traité à l'aide de Chinook 3+**

NOTES: **6**

Created Date: **2024/01/17**

Updated Date: **2024/01/17**

Restricted: **N**

Label: **General**

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Office: **CORR**

Text: **RROC Mission Support application pre-check completed. / CORR Soutien aux missions a complété le polissage de cette demande.**

NOTES: **7**

Created Date: **2023/12/31**

Updated Date: **2023/12/31**

Restricted: **N**

Label: **General**

Office: **SMGC-système**

Text: **Signed By / Signé Par: Tolulope Olamiposi, Adewole (12/31/2023)**

NOTES: **8**

Created Date: **2023/12/31**

Updated Date: **2023/12/31**

Restricted: **N**

Label: **General**

Office: **SMGC-système**

Text: **Principal Applicant UCI / IUC du répondant: 1121671817**