



Sample GCMS File

(Global Case Management System)

Updated January 6, 2020

Web GcmsNotes.com

E-mail support@caipsnotes.com

About us

Thank you for requesting this sample GCMS file.

CAIPS Notes Services founded in 2002 is a service for those who applied for a Canadian visa (Immigration, Student, Visitor or Work visa).

This service allows applicants to obtain information contained in their visa file. This visa file is often referred to as CAIPS and/or GCMS. It is the most comprehensive and up-to-date information that can be legally obtained from Citizenship and Immigration Canada (CIC).

A hands-on team ensures a prompt, interactive and trustworthy service beside assistance in understanding CAIPS/GCMS procedures and processes, which prior to the launch of CaipsNotes.com was too scant.

CAIPS Notes Services ascribe their outstanding success to providing an honest, transparent and an affordable service which is user friendly and reliable.

Should you have any questions or concerns about our service please feel free to contact us and we will be only too pleased to address them.

Sincerely,

The Team at CAIPS Notes Services
CaipsNotes.com and GcmsNotes.com

APPLICATION:

Created Date:	Immigration file number
Created by:	Date local embassy received files from CIC
Updated Date:	Visa officer's code name
Updated by:	Time/date when the application was last updated
Primary Office:	Visa officer's code name
Secondary Office:	Local embassy
App#:	Immigration file number
App Status:	Open or closed
App Status Reason:	In- progress, open, closed, refused
Rec'd Date:	Date when the local embassy received the application
Rec'd Via:	Mail (How the application was received at the local embassy)
Lock-In Date:	Date when CIC received/opened the application
Category:	Immigration category (Family class, Skilled worker, etc)
Sub-Category:	
Group Name:	
Group#:	
Special Program(s):	
Correspond Lang:	English, other language
Interview Lang:	English, other language
Cost Recovery:	Complete, deferred, etc
RPRF:	(Right of Permanent Residence Fee) Complete, deferred, Outstanding
Overpayment:	No, Yes
Restricted Notes:	No, Yes
Prospective App Delete Date:	If application is withdrawn
Name:	Name of sponsored applicant
DOB:	Date of birth (yyyy/mm/dd)
# of Client:	Number of applicants
# of Potential Visas:	Depends on number of clients
Province of Destination:	Destination of landing declared in application
City of Destination:	
CSQ File#:	
FOSS Doc#:	
Associated App:	

FAMILY CLASS SPONSORSHIP

SPR Correspond Lang:
CSC Date:
If eligible:
Misrepresentation:
Family Size:
SA's Met for:
Status:

REFUGEE

Processing Priority
Financial Support
Access Via:
Referral #:

ECONOMIC

HRSDC File#: Human Resources & Skills Development Canada confirmation #
Available Funds (CAD):
Net Worth (CAD):
Sub Eval:
Facilitator:
Ministerial Instruction Criteria:
Ministerial Instruction:

PNC INFORMATION

PNC#:
Issuance Date:
Valid To:
Stream:
Other Stream Description:

ASSESSMENTS

Eligibility: Not started, started, complete
Security: Not started, started, complete, cancelled
HIRV: Not started, started, complete, cancelled
Criminality: Not started, started, complete, cancelled
Org Crime: Not started, started, complete, cancelled
Medical: Passed, failed, complete, cancelled
Misrepresentation: Not started, started, complete
Other Reqs:
Final: Overall assessment decision (Refused, etc)

Summary of the application

PAPER FILE

Office:
Paper File #:
Location: Visa office

APPLICATION ASSIGNMENT

Assigned To: Visa officer's code name
Assigned By: Visa officer's code name
Due Date:

SECONDARY OFFICE(S)

SECONDARY OFFICE(S): 1
Created Date:
Created By:
Updated Date:
Updated By:
RC Code:
Office Name:

SPECIAL PROGRAM

SPECIAL PROGRAM: 1

Created Date:

Created By:

Updated Date:

Updated By:

Primary: Yes, no

Description:

MINISTERIAL INSTRUCTION CRITERIA

MINISTERIAL INSTRUCTION CRITERIA: 1

Created Date:

Created By:

Updated Date:

Updated By:

Primary: Yes, no

Description:

CLIENT DETAILS

CLIENT DETAILS:1

For Primary applicant

Created Date:

Date when application was received by CIC

Create By:

Visa officer's code name

Updated Date:

Updated By:

Visa officer's code name

Client/Party:

Primary applicant (PA)

UCI/Party ID:

Relationship:

Other Relationship Desc:

Acc:

Name:

Name of sponsored person

Gender:

Male, female

DOB:

Date of birth

DEP Type:

Dep Type Other Desc:

Effective Date:

Date when CIC received application

Expiry Date:

Disassoc Reason:

Other Disassoc Desc:

Counterfoil Required:

Yes, no ([click here to learn more](#))

Security:

Started, not started, complete, cancelled

HIRV:

Criminality:

Started, not started, complete, cancelled

Medical :

Passed, failed, cancelled

Misrepresentation:

Min Relief - Security:

Min Relief - HIRV:

Min Relief - Org Crime:

Citizenship:

Country of citizenship

CoR:

Country of origin

Place of Birth (City/Town):

Country of Birth:
 Marital Status: Spouse, common-law, conjugal
 Country of Refuge:
 Sponsor Length (months):
 Searched By: Visa officer's code name
 Searched Date:
 Travel Doc #: Passport number
 Travel Doc Expiry Date: Passport expiry date
 Travel Doc Country of Issue : Country where passport was issued
 Official Language: English or other language
 Can Communicate English: Yes, no
 Can Communicate French: Yes, no
 # of Years of Education:
 Level of Education:
 NOC: National Occupational Classification (NOC) number
 Occupation: Applicants occupation
 Telephone #:
 Fax #:
 E-mail:

CSQ INFORMATION

Québec selection certificate

Individual Ref#:
 Issuance Date:
 Valid To:

ADDRESS

Type: mailing
 Country:
 Apt/Unit#:
 Street #:
 Street Address:
 Street Address2:
 PO Box:
 City/Town:
 Province/State:
 District:
 Postal Code:

CLIENT DETAILS: 2

For dependants, etc

Created Date: Date when application was received by CIC
 Create By: Visa officer's code name
 Updated Date:
 Updated By: Visa officer's code name
 Client/Party: DEP (Dependant)
 UCI/Party ID:
 Relationship: Spouse, child, etc
 Other Relationship Desc:
 Acc: (Accompanying), Yes, no
 Name: Name
 Gender: Male, female

DOB: Date of birth
 DEP Type: Dependant type
 Dep Type Other Desc:
 Effective Date: Date when CIC received application
 Expiry Date:
 Disassoc Reason:
 Other Disassoc Desc:
 Counterfoil Required: Yes, no
 Security: Started, not started, complete
 HIRV:
 Criminality: Started, not started, complete
 Medical : Passed, failed
 Misrepresentation:
 Min Relief - Security:
 Min Relief - HIRV:
 Min Relief - Org Crime:
 Citizenship: Country of citizenship
 CoR: Country of origin
 Place of Birth (City/Town):
 Country of Birth:
 Marital Status: Spouse, common-law, conjugal
 Country of Refuge:
 Sponsor Length (months):
 Searched By: Visa officer's code name
 Searched Date:
 Travel Doc #: Sponsor's passport number
 Travel Doc Expiry Date: Passport expiry date
 Travel Doc Country of Issue : Country where passport was issued
 Official Language: English or other language
 Can Communicate English: Yes, no
 Can Communicate French: Yes, no
 # of Years of Education:
 Level of Education:
 NOC: National Occupational Classification (NOC) number
 Occupation:
 Telephone #:
 Fax #:
 E-mail:

CSQ INFORMATION

Québec selection certificate

Individual Ref#:
 Issuance Date:
 Valid To:

ADDRESS

Type: mailing
 Country:
 Apt/Unit#:
 Street #:
 Street Address:
 Street Address2:

PO Box:
City/Town:
Province/State:
District:
Postal Code:

PARTY DETAILS

Details of the immigration consultant

PARTY DETAILS: 1

Created Date:
Created By:
Updated Date:
Updated By:
Client/Party:
UCI/Party ID:
Relationship:
Other Relationship Desc:
Acc:
Name:
Gener:
DOB:
Effective Date:
Expiry Date:
Disassoc Reason:
Other Disassoc Descrip:

AUTHORIZED REPRESENTATIVE

Status:
Province/Territory:
Membership #:
Expiry Date:

ADDRESS

Type:
Country:
Apt/Unit #:
Street #:
Street Address:
Street Address 2:
PO Box:
City/Town:
Province/State:
District:
Postal Code:
Telephone #:
Fax #:
E-mail:

ELIGIBILITY

ELIGIBILITY ASSESSMENT

ELIGIBILITY ASSESSMENT: **1**

Created Date:
Created By: Visa officer's code name
Updated Date:
Updated By: Visa officer's code name
UCI:
Family Name: Surname of sponsored person
Given Name: Name of sponsored person
Type: Eligibility, Selection, etc
Status: **Started, not started, complete**
Status Updated by: Visa officer's code name
Status Date:
Updated By: Visa officer's code name
Due Date: **Bring forward date**
Assigned To: Visa officer's code name
Assigned Date:
Assigned By: Visa officer's code name
Activity # :
Total Points:

WORK EXPERIENCE

WORK EXPERIENCE: **0**

ARRANGED EMPLOYMENT

ARRANGED EMPLOYMENT: **0**

ADMISSIBILITIES

SECURITY

SECURITY:1

Created Date:
Created By:
Updated Date:
Updated By:
UCI #:
Family Name: Surname of sponsored person
Given Name: Name of sponsored person
Type: Security
Status: **Started, not started, complete**
Validity Date:
Status Updated by: Visa officer's code name
Status Updated Date:
Assigned By: Visa officer's code name
Assigned To: Visa officer's code name
Due Date: **Bring forward date**
Activity # :

ATTACHMENTS
ATTACHMENTS: 0
SUB ACTIVITES
SUB ACTIVITIES: 0

HIRV

HIRV: 0

CRIMINALITY

CRIMINALITY
CRIMINALITY:1

Created Date:

Created By:

Updated Date:

Updated By:

UCI #:

Family Name:

Surname of sponsored person

Given Name:

Name of sponsored person

Type: Security

Status:

Started, not started, complete

Validity Date:

Status Updated by:

Visa officer's code name

Status Updated Date:

Assigned By:

Visa officer's code name

Assigned To:

Visa officer's code name

Due Date:

Bring forward date

Activity # :

ATTACHMENTS
ATTACHMENTS: 0

CRIMINALITY HISTORY
CRIMINALITY HISTORY: 0

POLICE CERTIFICATES
POLICE CERTIFICATES: 0

SUB ACTIVITIES
SUB ACTIVITIES: 0

ORGANIZED CRIME

ORGANIZED CRIME: 0

MEDICAL

MEDICAL: 1
Created Date:
Created By:
Updated Date:
Updated By:
UCI #:
Family Name:
Given Name:
Type:
App Status:
Validity Date:
Status Updated by:
Status Updated Date:
Assigned By:
Assigned To:
Due Date:
Activity #:
IME #:
UMI:
Assessed For: PR
Reason For Closure:
RMO:
M Profile:
Description:
S Profile:
Description:
MOF Rationale Exist:
MOF Review:
Valid Until:

Did you know you can also request your “Medical File”?

Surname of sponsored person
First name of sponsored person
Medical
PASSED

Visa officer’s code name

Visa officer’s code name
Visa officer’s code name
1 year from when the application was filed

Immigration Medical Examination #

Regional Medical Office

EDE, ED, IMA, IME, EFE,EFC (Medical decision by Visa Officer)

Yes, no (MOF = Medical Observations & Furtherance)

1yr from date of medical exam

MISREPRESENTATION
MISREPRESENTATION: 0

MINISTERIAL RELIEF
MINISTERIAL RELIEF: 0

FINALIZE APPLICATION

DOCUMENT ISSUANCE
DOCUMENT ISSUANCE: 0

REFUSAL GROUND
REFUSAL GROUND: 0

CORRESPONDENCE

OUTGOING

OUTGOING: 1

Created Date:

Created By:

Updated Date:

Updated By:

Create Office:

UCI #:

Request to Issue:

Document Type:

Status:

Assigned To:

Assigned By:

Due Date:

All Rec'd:

Via:

Via Details:

Name:

Status Updated by:

Status Updated Date:

Sent By:

Sent Date:

Printed By:

Printed Date:

Document request come from CIC to applicant

Local embassy

Letter

AOR (Acknowledgement of Receipt)

Sent

Visa officer's code name

Visa officer's code name

Yes, no

Name of sponsored person

Visa officer's code name

Visa officer's code name

ITEM(S) REQUESTED

ITEM(S) REQUESTED: 0

ATTACHMENTS

ATTACHMENTS: 0

INCOMING

INCOMING: 1

Created Date:

Created By:

Updated Date:

Updated By:

Create Office:

Item:

Item For:

Comments:

Due Date:

Status:

Via:

Via Details:

Received By:

Received Date:

Replied By:

Replied Date:

Documents received by CIC/Visa office from applicant

Local embassy

Passport/Travel Documents

Primary applicant (PA)

Started, not started

Status Updated By:
Status Updated Date:
Letter ID:

Visa officer's code name

OTHER REQS

H & C

H & C: 0

A39-A41

A39-A41:0

VERIFICATION

VERIFICATION: 0

MATCHING CENTRE

MATCHING CENTRE: 0

EVENTS

EVENTS: 0

PAYMENTS

PAYMENTS: 0

FEES

FEES: 1

FPC for processing fee

FEES: 2

RPRF

ASSOCIATIONS

APPLICATIONS & CASES

APPLICATION & CASES : 0

ORGANIZATIONS & ENTITIES

ORGANIZATION & ENTITIES: 0

GROUPS

HISTORY

APPLICATION STATUS

Remarks: Application sequence is arranged from the most recent application to the oldest

APPLICATION STATUS: 1

App Status: [Open](#), [close](#)
App Status Reason: [In progress](#), [completed](#)
Other Reason Desc:
Leave Decision:
Leave Decision Date:
Decision:
Decision Date:
Office:
Updated Date:
Updated By: [Visa officer's code name](#)

APPLICATION STATUS: 2

App Status: [Open](#), [close](#)
App Status Reason: [In progress](#), [completed](#)
Other Reason Desc:
Leave Decision:
Leave Decision Date:
Decision:
Decision Date:
Office:
Updated Date:
Updated By: [Visa officer's code name](#)

APPLICATION:

APPLICATION:1

Field Name: [Medical](#)
Action: [Updated](#)
Old Value: [In Progress](#)
New Value: [PASSED](#)
Updated Date:
Updated By: [Visa officer's code name](#)
Office: [Visa office](#)

APPLICATION:2

Field Name:
Action:
Old Value:
New Value:
Updated Date:
Updated By: [Visa officer's code name](#)
Office: [Visa office](#)

ACTIVITY

Remarks: Activity sequence is arranged from the most recent activity to the oldest

ACTIVITY: 1
UCI:
Name: Name of sponsored person
Sub Activity/Activity Type: Medical
Status: Passed
Updated Date:
Updated By: Visa officer's code name
Office: Visa office

ACTIVITY: 2
UCI:
Name: Name of sponsored person
Sub Activity/Activity Type: Medical
Status: In-Progress
Updated Date:
Updated By: Visa officer's code name
Office: visa office

PAPER FILE

PAPER FILE: 1
Created Date:
Create By: Visa officer's code name
Updated Date:
Updated By: Visa officer's code name
Primary: Yes, no
Office: Visa office
Paper File#:
Location:
App Status: Open, close
Archive Date:
FOSS: Yes, no

PAPER FILE HISTORY

Remarks: Paper file history sequence is arranged from the most recent history to the oldest

PAPER FILE HISTORY: 1
Created Date:
Created By: Visa officer's code name
Updated Date:
Updated By: Visa officer's code name
Office: Visa office
Paper File#:
File Status:

Location: Registry
Archive Date:
Transfer ID:
Transfer Outcome: Received

PAPER FILE HISTORY: 2

Created Date:
Created By: Visa officer's code name
Updated Date:
Updated By: Visa officer's code name
Office: CPP Ottawa
Paper File#:
File Status:
Location: In transit
Archive Date:
Transfer ID:
Transfer Outcome: Transferred

NOTES

Remarks:

- 1. Arranged from very recent - Notes to the oldest**
- 2. The "TEXT" in the last line of NOTES are information / assessment written by Visa Officer**
- 3. Every inquiry or follow-up on the application are logged as notes in the application file**

NOTES: 1

Created Date:
Created By: Visa officer's code name
Updated Date:
Updated By: Visa officer's code name
Restricted: No, yes
Label: General
Office: Visa office
Text: Information/assessment written by Visa Officer

NOTES: 2

Created Date:
Created By: Visa officer's code name
Updated Date:
Updated By: Visa officer's code name
Restricted: No, yes
Label: General
Office: Visa office
Text: Information/assessment written by Visa Officer