



## APPLICATION FOR STUDY PERMIT MADE OUTSIDE OF CANADA

If you need more space for any section, print out an additional page containing the appropriate section, complete and submit it with your application.

**IMPORTANT:** Please ensure that you download this application form directly from your online application document checklist. This will ensure that you have the latest version of the form, as it is frequently updated.

<b>1 UCI</b> 8 to 10 digit number which can be found on most correspondence from IRCC and on your study permit (don't include dashes, just numbers)	<b>2 *I want service in</b>
--	-----------------------------

OFFICE USE ONLY Validated
------------------------------

### PERSONAL DETAILS

<b>1 Full name</b> *Family name (as shown on your passport or travel document)	Given name(s) (as shown on your passport or travel document)
---	--

<b>2 a) Have you ever used any other name (e.g. Nickname, maiden name, alias, etc.) ?</b>	<input type="checkbox"/> *No <input type="checkbox"/> *Yes
b) Family name <small>Family name is last name - If you do not have a family name, enter all of your given name(s) in the family name field and leave the given name(s) field blank</small>	Given name(s) <small>Given name is first name</small>

<b>3 *Sex</b>	<b>4 Date of birth</b> *YYYY *MM *DD	<b>5 Place of birth</b> *City/Town	*Country or Territory
---------------	---	---------------------------------------	-----------------------

<b>6 *Citizenship</b> <small>Your current citizenship - If you are a dual citizen, please indicate the citizenship of the passport you are using to apply for your study permit</small>	
--	--

7 Current country or territory of residence:				
Country or Territory	Status	Other	From	To
			YYYY-MM-DD	YYYY-MM-DD

<b>8 Previous countries or territories of residence:</b> During the past five years have you lived in any country or territory other than your country of citizenship or your current country or territory of residence (indicated above) for more than six months?	<input type="checkbox"/> *No <input type="checkbox"/> *Yes			
Country or Territory	Status	Other	From	To
			YYYY-MM-DD	YYYY-MM-DD
<small>Only list countries that aren't your country of citizenship or current country of residence that you have lived in for 6 consecutive months or more.</small>				
			YYYY-MM-DD	YYYY-MM-DD

<b>9 Country or territory where applying:</b> Same as current country or territory of residence? <input type="checkbox"/> *No <input type="checkbox"/> *Yes				
Country or Territory	Status	Other	From	To
			YYYY-MM-DD	YYYY-MM-DD

<b>10 *a) Your current marital status</b>	<b>b) (If you are married or in a common-law relationship)</b> Provide the date on which you were married or entered into the common-law relationship	Date YYYY-MM-DD
c) Provide the name of your current Spouse/Common-law partner		
Family name	Given name(s)	

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

This form is made available by Immigration, Refugees and Citizenship Canada and is not to be sold to applicants.

Applicant Name	Date of Birth
----------------	---------------

**PERSONAL DETAILS (CONTINUED)**

<b>11 a) Have you previously been married or in a common-law relationship?</b> <input type="checkbox"/> *No <input type="checkbox"/> *Yes b) Provide the following details for your previous Spouse/Common-law Partner: Family name <span style="margin-left: 200px;">Given name(s)</span>			
c) Date of birth YYYY MM DD	d) Type of relationship	From YYYY-MM-DD	To YYYY-MM-DD

**LANGUAGE(S)**

<b>1</b> *a) Native language/ Mother Tongue <small>the language your family used at home when you were a child (birth language)</small>	*b) Are you able to communicate in English and/or French?	c) In which language are you most at ease?
d) Have you taken a test from a designated testing agency to assess your proficiency in English or French? <input type="checkbox"/> *No <input type="checkbox"/> *Yes <small>if you have ever taken a designated language test, indicate 'yes' (like IELTS, for example)</small>		

**PASSPORT**

<b>1</b> *Passport number	<b>2</b> *Country or territory of issue <small>this is the country with the authority to issue your passport - for example, if you have a Chinese passport which was issued in Toronto, Canada, you would still select "China"</small>	<b>3</b> *Issue date YYYY-MM-DD	<b>4</b> *Expiry date <small>IRCC won't issue a study permit beyond current passport expiry date</small> YYYY-MM-DD
<b>5</b> * For this trip, will you use a passport issued by the Ministry of Foreign Affairs in Taiwan that includes your personal identification number? <input type="checkbox"/> *No <input type="checkbox"/> *Yes			
<b>6</b> * For this trip, will you use a National Israeli passport? <input type="checkbox"/> *No <input type="checkbox"/> *Yes			

**NATIONAL IDENTITY DOCUMENT**

<b>1</b> Do you have a national identity document? <input type="checkbox"/> *No <input type="checkbox"/> *Yes <small>this can be a national ID issued by your country of citizenship (besides your passport), if available</small>				
<b>2</b> Document number	<b>3</b> Country or territory of issue	<b>4</b> Issue date YYYY-MM-DD	<b>5</b> Expiry date YYYY-MM-DD	

**US PR CARD**

<b>1</b> Are you a lawful permanent resident of the United States? <input type="checkbox"/> *No <input type="checkbox"/> *Yes		
<b>2</b> U.S. Citizenship and Immigration Services (USCIS) number	<b>3</b> Expiry date YYYY-MM-DD	

**CONTACT INFORMATION**

**If submitting your application by mail:**

- All correspondence will go to this address unless you indicate your e-mail address below.
- Indicating an e-mail address will authorize all correspondence, including file and personal information, to be sent to the e-mail address you specify.
- If you wish to authorize the release of information from your application to a representative, indicate their e-mail and mailing address(es) in this section and on the IMM5476 form.

<b>1 Current mailing address</b>						
P.O. box	Apt/Unit	Street no.	*Street name			
*City/Town		*Country or Territory		Province/State	Postal code	District
<b>2 Residential address</b> Same as mailing address? <input type="checkbox"/> *No <input type="checkbox"/> *Yes						
Apt/Unit	Street no.	Street name			City/Town	
Country or Territory			Province/State	Postal code	District	

Applicant Name		Date of Birth	
<b>3 Telephone no.</b> <input type="checkbox"/> Canada/US <input type="checkbox"/> Other Type Country Code No. Ext.		<b>4 Alternate Telephone no.</b> <input type="checkbox"/> Canada/US <input type="checkbox"/> Other Type Country Code No. Ext.	
<b>5 Fax no.</b> <input type="checkbox"/> Canada/US <input type="checkbox"/> Other Country Code No. Ext.		<b>6 E-mail address</b> make sure to enter the email that you associate with your IRCC secure account (GC Key)	

**DETAILS OF INTENDED STUDY IN CANADA**

<b>1</b> I have been accepted at the following educational institution (Attach the original letter of acceptance).			
*a) Name of School		*b) My level of study will be:	c) My field of study will be: choose the closest match - this doesn't have to be 100% accurate
d) Complete address of school in Canada			
*Province	*City/Town	*Address	
<b>2</b> a) Designated Learning Institution # (O#) O19305471522	b) My Student ID #:	<b>3</b> Duration of expected study	*From the date your program begins YYYY-MM-DD
*To the projected completion date of your degree program + 90 days YYYY-MM-DD	<b>4</b> The cost of my studies will be: *Tuition remaining tuition cost for entire degree program Room and board remaining cost for entire degree program Other	<b>5</b> *Funds available for my stay (CAD) total of "tuition" and "room and board" costs from box 4 (IRCC does not expect you to have access to this much liquid funds at the time of application)	<b>6</b> *a) My expenses in Canada will be paid by: can choose "myself", "parents" or "other" b) Other if choosing "other", please briefly explain the source of your education funding
<b>7</b> If you have been issued a Provincial Attestation Letter (PAL)/Territorial Attestation Letter (TAL), provide the: if you are exempt from the PAL requirement, please leave this section blank Document Number this number can be found on your Ontario PAL and will start with "ON" followed by several more characters (don't include dashes, just letters and numbers)		Expiry Date (YYYY-MM-DD)	<b>8</b> If you have been issued a Quebec Acceptance Certificate (CAQ), provide the: Certificate Number Expiry Date (YYYY-MM-DD)

If you are less than 17 years of age, you must fill out the Custodian Declaration (IMM 5646) form.

**EDUCATION**

Have you had any post secondary education (including university, college or apprenticeship training)?  \*No  \*Yes

If you answered "yes", give full details of your highest level of post secondary education.

<b>1</b>	From	Field and level of study	School/Facility name	
	YYYY MM			
	To	City/Town	Country or Territory	Province/State
	YYYY MM			

**EMPLOYMENT**

Give details of your employment for the past 10 years, including if you have held any government positions (such as civil servant, judge, police officer, mayor, member of parliament, hospital administrator.)

<b>1</b>	From	*Current Activity/Occupation this should describe what you are currently doing at the time you submit your study permit application - if you are not working, you could indicate 'student' or 'unemployed'	*Company/Employer/Facility name If studying, please list the school name here. If working, please list the employer name here. If unemployed, please write "N/A".	
	*YYYY *MM			
	To	*City/Town	*Country or Territory	Province/State
	YYYY MM			
<b>2</b>	From	Previous Activity/Occupation	Company/Employer/Facility name	
	YYYY MM			
	To	City/Town	Country or Territory	Province/State
	YYYY MM			
<b>3</b>	From	Previous Activity/Occupation	Company/Employer/Facility name	
	YYYY MM			
	To	City/Town	Country or Territory	Province/State
	YYYY MM			

Please list all paid employment for the past 10 years in this section (including part-time work, full-time work, and co-ops/internships). If you don't have enough space on the form, you can add further employment on an employment addendum and upload the completed addendum to your application as an optional document.

Applicant Name

Date of Birth

**BACKGROUND INFORMATION**

You must complete this section if you are 18 years of age or older.

1 a) Within the past two years, have you or a family member ever had tuberculosis of the lungs or been in close contact with a person with tuberculosis?  No  Yes

b) Do you have any physical or mental disorder that would require social and/or health services, other than medication, during a stay in Canada?  No  Yes

c) If you answered "yes" to question 1a) or 1b), please provide details and the name of the family member (if applicable).

2 a) Have you ever remained beyond the validity of your status, attended school without authorization or worked without authorization in Canada?  No  Yes

b) Have you ever been refused a visa or permit, denied entry or ordered to leave Canada or any other country or territory?  
*if you have ever been refused a visa in any country (not just Canada), please indicate "yes" to this question and explain in the text box below*  No  Yes

c) Have you previously applied to enter or remain in Canada?  
*if you have previous Canadian immigration applications, you must answer "yes" to this question and provide details of any current/previous statuses held in the text box below*  No  Yes

d) If you answered "yes" to question 2a), 2b) or 2c), please provide details.

*provide information here if you answered yes to either (a), (b), or (c) above*

3 a) Have you ever committed, been arrested for, or been charged with or convicted of any criminal offence in any country or territory?  No  Yes

b) If you answered "yes" to question 3a) above, please provide details.

4 a) Did you serve in any military, militia, or civil defence unit or serve in a security organization or police force (including non obligatory national service, reserve or volunteer units)?  No  Yes

b) If you answered yes to question 4a), please provide dates of service and countries or territories where you served.

*even mandatory military service must be declared in this section*

5 Are you, or have you ever been a member or associated with any political party, or other group or organization which has engaged in or advocated violence as a means to achieving a political or religious objective, or which has been associated with criminal activity at any time?  No  Yes

6 Have you ever witnessed or participated in the ill treatment of prisoners or civilians, looting or desecration of religious buildings?  No  Yes

**If you answered "yes" to any of questions 3 to 6 above, or upon request of a visa officer, you MAY BE REQUIRED to fill out IMM 5257 Schedule 1.**

Applicant Name

Date of Birth

**SIGNATURE**

Citizenship and Immigration Canada (CIC), or an organization at CIC's request, may want to contact you in the future to ask you about any services you received from CIC prior to the application process (such as participation in an information forum), during the application process (including the application process itself as well as orientation or accreditation services), and services received after arriving in Canada (including settlement, integration and citizenship). CIC will use this information, along with the information provided by other individuals, for research, performance measurement or evaluation purposes. CIC will not use this information to make any decisions about you personally.

Do you consent to be contacted by CIC, or an organization at CIC's request, in the future? (Y/N)  No  Yes

I understand that CIC is collecting this personal information to assess whether I should be granted a study permit and will use this information to verify my eligibility for a study permit as well as my compliance with the conditions of my study permit. CIC may disclose my personal information to CBSA to enforce the requirements of the Immigration and Refugee Protection Act.

I also understand that CIC may disclose my personal information to my designated learning institution to inquire whether I am in compliance with the conditions of my study permit. I consent to the disclosure of my personal information by my designated learning institution to CIC for the purpose of determining whether I am in compliance with these conditions. Failure to provide such consent will result in a refusal to grant a study permit.

I declare that I have answered all questions in this application fully and truthfully.

Signature of Applicant or Parent/Legal Guardian's for a person under 18 years of age.

Date: YYYY-MM-DD

type your full name as it appears in your current passport

**IMPORTANT NOTE:**

**This application must be signed and dated before it is submitted by mail.**

Do not forget to include photos, fees (if applicable) and any other documents required. Review the application guide for more information and verify that you have completed and provided all of the required documents as per the document checklist.

**PRIVACY NOTICE**

Personal information provided on this form is collected and will be used, disclosed, and retained by Immigration, Refugees and Citizenship Canada (IRCC) under the authority of the Immigration and Refugee Protection Act (IRPA). The personal information provided will be used for the purpose of processing applications. The personal information provided may be disclosed to other federal government institutions and third parties including law enforcement bodies, provincial/territorial governments and/or foreign governments for the purpose of validating identity, eligibility and admissibility. The personal information provided may be disclosed to Designated Learning Institutions for the purpose of validating Letters of Acceptance and or determining compliance with study permit conditions.

The personal information collected on an application, and other information collected in support of an application, may be used for computer analytics to support processing of applications and decision making, including your application. Personal information, including from advanced analytics, automation, and other technologies, may also be used for purposes including research, statistics, program and policy evaluation, internal audit, compliance, risk management, strategy development and reporting.

Where biometrics are provided in support of an application, the fingerprints collected will be stored and shared with the RCMP. The fingerprint record may also be disclosed to law enforcement agencies in Canada in accordance with subsection 13.11(1) of the Immigration and Refugee Protection Regulations. The information may be used to establish or verify the identity of a person in order to prevent, investigate, or prosecute an offence under any law of Canada or a Province. This information may also be used to establish or verify the identity of an individual whose identity cannot reasonably be otherwise established or verified because of physical or mental condition. Canada may also share immigration information related to biometric records with foreign governments with whom Canada has an agreement or arrangement.

Failure to complete the form in full may result in a delay or the application not being processed. The Privacy Act gives individuals the right of access to, protection, and correction of their personal information. Further details are available in [Info Source](#). If you are not satisfied with the manner in which IRCC handles your personal information, you may exercise your right to file a complaint to the [Office of the Privacy Commissioner of Canada](#). The collection, use, disclosure and retention of your personal information is further described in IRCC's personal information bank - [IRCC PPU 051](#).

Validate

-once you have completed the entire form, please read it through again to check for errors - then click the "Validate" button to finish the form  
-this will generate an additional page of bar codes