

Government Gouvernement of Canada du Canada

## APPLICATION TO CHANGE CONDITIONS, EXTEND MY STAY OR REMAIN IN CANADA AS A STUDENT

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.

1	UCI		2 *Iv	want service in				OFFICE USE ONLY
		e found on most correspondence don't include dashes, just numb						Validated
	I am applying for one of							
F					<b>T</b> • <b>P</b> • • <b>P</b>			
		pply for a study permit for t			* Restore my status as a student if your study permit has already exp		act the immigration consu	lltants in the
	* G	et a new temporary residen	it permit (for in	admissible applicants only)	International Experience Centre for	r assistance		
P	RSONAL DETAILS							
1								
		on your passport or travel do do not have a family name, enter			ven name(s) (as shown on your pas iven name is first name	sport or travel of	document)	
	eld and leave the given name(s) t		r all of your given	name(s) in the family name	wen name is inst name			
2	a) Have you ever used a	ny other name (e.g. Nickn	ame, maiden	name, alias, etc.) ?			ick name or preferred nam	
	b) if you answered "yes"	to question 2a), please pr	ovide the name	e (e.g. Nickname, maiden name			won't use this name on yo	ur permit or any
Fa	mily name			1	ven name(s)			
3	* Sex	4 Date of birth		5 Place of birth				
				* City/Town		* Country or 1	Territory	
		* YYYY * MI	M * DD					
6								
Y	our current citizenship - If you	are a dual citizen, please indicat	e the citizenship	of the passport you are using to appl	y for your study permit			
7	Current country or terri	tory of residence:						
	Country or	Territory		Status	Other		From	То
*			* select "student"	- if you have an active study permit			the date you first	the date your current study
	Cana	ada		- / / / - / -			entered Canada as a student	permit expires
L		e envitorios of residences	lusing the past	fue years have you lived in any	country of torritory other than you	in country	YYYY-MM-DD	WWY-MM-DD
8				icated above) for more than six	y country or territory other than you months?	licountry	* No	* Yes
	b) <b>if you answered "yes</b>	" to question 8a), please p	rovide details				select the appropriate res	ponse
	Country or	Territory		Status	Other		From	То
-							YYYY-MM-DD	YYYY-MM-DD
							YYYY-MM-DD	YYYY-MM-DD
9	* a) Your current marita	il status	b) (If y	ou are married or in a comm	on-law relationship) Provide the d	late .		Date
					ered into the common-law relations			
-	c) Provide the name of yo	our current Spouse/Commo	n-law partner					-MM-DD
	Family name			Giv	ven name(s)			
	d) If you are married or i	in a common-law relationsh	ip, is your spor	use or common-law partner a C	anadian citizen or permanent resid	ent?	N	o Yes
			FOR	OFFICE USE ONLY - DO NO	T WRITE IN THIS SPACE			
Ľ								
L								
		This form is made	available by I	mmigration, Refugees and Ci	tizenship Canada and is not to be	sold to applie	ants.	
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APPLICATION TO CHANGE CONDITIONS, EXTEND MY STAY OR REMAIN IN CANADA AS A STUDENT

Applicant Name     D       PERSONAL DETAILS (CONTINUED)     10 a) Have you previously been married or in a common-law relationship? * No * Yes	Anto of Diath
	Date of Birth
b) Provide the following details for your previous Spouse/Common-law partner:	
Family name Given name(s)	
c) Type of relationship d) From To e) Date of Birth	
YYYY-MM-DD YYYY-MM-DD YYYY MM DD	
LANGUAGE(S)	
1 * a) Native language/Mother Tongue * b) Are you able to communicate in English and/or French? c) In which language are you most at ease?	
the language your family used at home when you were a child (birth	
language)	
d) Have you taken a test from a designated testing agency to assess your proficiency in English or French? * No * Yes if you have ever taken a designated language test, indi	icate "yes" (like
IEL'IS, for example)	
PASSPORT     1     * Passport number     2     * Country or territory of issue     3     * Issue date     4     * Expiry date	
1       * Passport number       2       * Country or territory of issue this is the country with the authority to issue your passport - for example, if you have       3       * Issue date       4       * Expiry data IRCC wort issue as	
a Chinese passport which was issued in Toronto, Canada, you would still select your current passpo	ort expiry date
	MM-DD
6 * For this trip, will you use a National Israeli passport? * No *Yes	
NATIONAL IDENTITY DOCUMENT	
Do you have a national identity document? No 📄 * Yes this can be a national ID issued by your country of citizenship (besides your passport), if available	
2     Document number     3     Country or territory of issue     4     Issue date     5     Expiry date	
	le
YYYY-MM-DD YYYY-M	MM-DD
	WW-DD
US PR CARD	
Are you a lawful Permanent Resident of the United States with a valid alien registration card (green card)?	
2 Document number 3 Evolved at e	
2 Document number 3 Expiry date	
Document number	
CONTACT INFORMATION	
YYYY-MM-DD	
CONTACT INFORMATION  If submitting your application by mail:  - All correspondence will go to this address 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.	
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IMM 5709 (10-2024) E APPLICATION TO CHANGE CONDITIONS, EXTEND MY STAY OR REMAIN IN CANADA AS A STUDENT IMMIGRATION, REFUGEES AND CITIZENSHIP CANADA IMMIGRATION, RÉFUGIÉS ET CITOYENNETÉ CANADA

				1						PAGE 3 OF 5
App	licant Name									Date of Birth
<u> </u>	MING INTO	CANADA								
1				* Date		* Place				
	Date and place of your original entry to     Canada     YYYY-MM-E				port of entry where you first entered Canada (for example, the international airport			onal airport where you first landed		
2	* a) The origi	nal purpose for o	coming to Canada			b) Other				
	your status w	hen you first entere	ed Canada							
3	Date and pla	ce of your most	recent entry to	Date		Place				
Canada (if not the same as original entry)						port of entr	y where you last entered	Canada		
4	If applicable,	provide the doc	ument number of the r	YYYY-MM-D nost recent Visitor Record, S		Document located in th		ır study permit	/ work permit / visit	tor record (a letter followed by 9
			orary Resident Permit is	ssued to you.		digits - for e	xample, the document nu	imber for a stu	dy permit would be	Fxxxxxxxx)
_			DY IN CANADA	atitution						
_	Name of Sch		ollowing educational ir	istitution	* My level of st	tudy will be:		My field	of study will be:	
aj	Name of Sch	001			My level of s	ady will be.				s doesn't have to be 100% accurate
b) C	omplete add	ress of school in	Canada							
	ovince	* City/Town			* Address					
2	Designated L	earning Institution	on # (O#)	My Student ID # is:			3	,	From	* To
	O19305471522						Duration of expected study		validate the form	the projected completion date of your degree program + 90 days YYYY-MM-DD
4	The cost of n	ny studies will be	: 5	* a) Funds available for n	ny stay(CAD)	* b) My exper	ises in Canada will be		c) Other	
rema	* Tuition ining tuition	Room and boar remaining cost fo		otal of "tuition" and "room and b ox 4 (please note: IRCC does no		can choose "my	rself", "parents" or "other		if choosing "other", your education fund	please briefly explain the source of ding
cost	for entire ee program	entire degree	ha ha	ave access to this much liquid fu						
6	a) In additio	n to a study perr			) What type of	work permit are	you applying for: i	f applicable, se	lect "co-op work peri	mit"
	applying for if you are in a c	a work permit? legree program wit	h a degree required interns		s, mar spe or	work permit are	you upplying lon	11	1 1	
7	If you have b	een issued a Qu	ebec Acceptance Certif	icate (CAQ), provide the:			peen issued a Provinci if you are exempt from			itorial Attestation Letter (TAL),
Cer	tificate Numb	ber		Expiry Date (YYYY-MM-DD)	) [1	Document Num	ber		Expiry Date	e (YYYY-MM-DD)
					,		e found on your Ontario d by several more charact and numbers)			
lf ye	ou are under	the age of maje	ority of the province/t	erritory where you intend	to study, you	must fill out th	ne Custodian Declara	tion [IMM5	546] form.	
ED	JCATION									
	Have you ha	d any post secor	dary education (includ	ing university, college or ap	prenticeship tra	aining)?	*No	Ye:	5	
	If you answe	red "yes", give fu	ull details of your highe	st level of post secondary e	ducation.		_	_		
		From	Field and level of stud	dy	School/	Facility name	· · · · · · · · · · · · · · · · · · ·			
				,						
1	YYYY	То	City/Town		Country	or Territory				Province/State
Ċ		10	City/Town		Country	or remory				TTOVINCE/State
	YYYY	MM		-						
-	PLOYMEN	and the second se		-	-					
	Give details hospital adm		nent for the past 10 yea	rs, including if you have hel	d any governm	ent positions (si	uch as civil servant, ju	dge, police o	officer, mayor, me	mber of parliament,
		From	* Current Activity/Oc				* Company/Employ			
				t you are currently doing at the ot working, indicate "student"	time you submit y	our study permit	if studying, please list	the school nar	ne here	
1	*ҮҮҮҮ	*MM To	* City/Town		*Countr	y or Territory	1			Province/State
	YYYY	MM From	Provious Activity/Occ	rupation			Company/Employer	/Facility par	ne	
		TOIL	Previous Activity/Occ	apation			company/employer	in active ride		
-	YYYY	MM								5
2		То	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.

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						PAGE 4 OF 5
App	licant Name					Date of Birth
EM	PLOYMENT (CONTINUED	2)				
<u> </u>	From	Previous Activity/Occupation		Company/Employer/Facility name		
1	YYYY MM					
3	То	City/Town	Country or Territory		Provinc	ce/State
	YYYY MM					
BAG	CKGROUND INFORMATIC	<b>DN</b> please answer this section accurately, as an incorrect answ	ver could lead to a refusal or a	determination of misrepresentation		
You	must complete this section	if you are 18 years of age or older.				
1	a) Within the past two years, I	have you or a family member ever had tuberculosis of t	ne lungs or been in close (	contact with a person with tuberculosis?	No	Yes
	b) Do you have any physical o	or mental disorder that would require social and/or heal	th services, other than me	edication, during a stay in Canada?	No	Yes
	c) If you answered "yes" to qu	uestion 1a) or 1b), please provide details.				
			•			
						100 C
					×	
2			-			
Г	a) Have you ever remained be	eyond the validity of your status, attended school witho	out authorization or worke	ed without authorization in Canada?	No No	Yes
		ad a vice of permit depied entry of ordered to leave Con	nda ar any other country	or torritory?		Yes
		ed a visa or permit, denied entry or ordered to leave Can a visa in any country (not just Canada), please indicate "yes" to thi			No	L res
	c) Have you previously applie	ed to enter or remain in Canada?			No	x Yes
		e Canada, you must answer "yes" to this question and provide det	ails of any current/previous st	tatuses held in the text box below		
		uestion 2a), 2b) or 2c), please provide details. u answered yes to either (a), (b), or (c) above				
	provide information here if yo	a answered yes to entiter (a), (b), or (c) above				
3	L					
F		been arrested for or been charged with or convicted of uestion 3a), please provide details.	any criminal offence in a	ny country or territory?	No No	Yes
	o, in your answered yes to q	desitori sull'piedse pitorite details.				
L.	L					
4	a) Did you serve in any milita or volunteer units)?	ry, militia, or civil defence unit or serve in a security orga	anization or police force (i	ncluding non obligatory national service, reserve	No	Yes
			an an barrit-si-ss.	. contrad		_
	b) If you answered "yes" to q	uestion 4a), please provide dates of service and countri	es or territories where you	u served.		
	even mandatory military service	ce must be declared in this section				
					k	

IMM 5709 (10-2024) E APPLICATION TO CHANGE CONDITIONS, EXTEND MY STAY OR REMAIN IN CANADA AS A STUDENT IMMIGRATION, REFUGEES AND CITIZENSHIP CANADA IMMIGRATION, RÉFUGIÉS ET CITOYENNETÉ CANADA

P	AC	ΞE	5	OF	
Date	of	Bi	rt	h	

1	BACKGROUND INFORMATION (CONTINUED)
	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       No       Yes         as a means to achieving a political or religious objective, or which has been associated with criminal activity at any time?       Yes
	6 Have you ever witnessed or participated in the ill treatment of prisoners or civilians, looting or desecration of religious buildings?
Ĵ	SIGNATURE
	Citizenship and Immigration Canada (CIC), or an organization at CIC' 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? 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.
	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**

Applicant Name

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



-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