



## 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.

If you are submitting online application, you do not need to print and sign the form.

Please validate after filling in all the information and save.

<b>1</b> UCI <small>This is an 8/10 digit number printed on your study permit</small>	<b>2</b> * I want service in <small>Select English or French</small>	<small>OFFICE USE ONLY</small> <b>Validated</b>
<b>3</b> I am applying for one or more of the following: <input checked="" type="checkbox"/> * An initial study permit or extension of study permit <input type="checkbox"/> * Restoration of temporary resident status as a student <input type="checkbox"/> * Initial temporary resident permit or extension of temporary resident permit		

**PERSONAL DETAILS**

<b>1</b> Full name <small>* Family name (as shown on your passport or travel document)</small> <small>As per your passport - Family name is last name</small>	<small>Given name(s) (as shown on your passport or travel document)</small> <small>As per your passport - Given name is first name</small>
<b>2</b> a) Have you ever used any other name (e.g. Nickname, maiden name, alias, etc.) ? <input type="checkbox"/> * No <input type="checkbox"/> * Yes <small>Answer base on your case</small> b) If you answered "yes" to question 2a), please provide the name (e.g. Nickname, maiden name, alias, etc.) <small>Family name</small> <small>Given name(s)</small>	

<b>3</b> * Sex <small>Select appropriately</small>	<b>4</b> Date of birth <small>As per your passport</small> * YYYY * MM * DD	<b>5</b> Place of birth <small>* City/Town</small> <small>As per your passport</small>	<small>* Country</small> <small>As per your passport</small>
-------------------------------------------------------	-----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------	-----------------------------------------------------------------

<b>6</b> * Citizenship <small>Your current Citizenship</small>
-------------------------------------------------------------------

<b>7</b> Current country of residence:				
Country	Status	Other	From	To
Canada	Student	Issue date and expiry date of your current study permit	YYYY-MM-DD	YYYY-MM-DD

<b>8</b> a) Previous countries of residence: During the past five years have you lived in any country other than your country of citizenship or your current country of residence (indicated above) for more than six months? <input type="checkbox"/> * No <input type="checkbox"/> * Yes b) If you answered "yes" to question 8a), please provide details <small>Answer base on your case</small>				
Country	Status	Other	From	To
			YYYY-MM-DD	YYYY-MM-DD
			YYYY-MM-DD	YYYY-MM-DD

<b>9</b> * a) Your current marital status <small>Answer base on your case</small>	b) (If you are married or in a common-law relationship) Provide the date on which you were married or entered into the common-law relationship <span style="font-size: 2em;">▶</span>	Date YYYY-MM-DD
--------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------

c) Provide the name of your current Spouse/Common-law partner <small>Family name</small> <small>Given name(s)</small>	
d) If you are married or in a common-law relationship, is your spouse or common-law partner a Canadian citizen or permanent resident? <input type="checkbox"/> No <input type="checkbox"/> Yes	

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE



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

**PERSONAL DETAILS (CONTINUED)**

<b>10 a) Have you previously been married or in a common-law relationship?</b> <input type="checkbox"/> * No <input type="checkbox"/> * Yes <span style="float:right; background-color:yellow;">Answer base on your case</span>				
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)**

<b>1 * a) Native language/Mother Tongue</b> <span style="background-color:yellow;">As applicable</span>	<b>*b) Are you able to communicate in English and/or French?</b>	<b>c) In which language are you most at ease?</b>
<b>d) Have you taken a test from a designated testing agency to assess your proficiency in English or French?</b> <input type="checkbox"/> * No <input type="checkbox"/> * Yes		

**PASSPORT**

<b>1 * Passport number</b> <span style="background-color:yellow;">As per your passport. If it expires soon, have it renewed.</span>	<b>2 * Country of issue</b>	<b>3 * Issue date</b> YYYY-MM-DD	<b>4 * Expiry date</b> 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> <span style="background-color:yellow;">As applicable</span>					
P.O. box	Apt/Unit	Street no.	* Street name		
* City/Town	* Country Canada		* Province	* Postal code	
<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 Canada		Province	Postal code	
<b>3 Telephone no.</b> <input type="checkbox"/> Canada/US <input type="checkbox"/> Other			<b>4 Alternate Telephone no.</b> <input type="checkbox"/> Canada/US <input type="checkbox"/> Other		
Type	Country Code	No.	Ext.	Type	Country Code No. Ext.
<b>5 Fax no.</b> <input type="checkbox"/> Canada/US <input type="checkbox"/> Other			<b>6 E-mail address</b>		

**COMING INTO CANADA**

<b>1</b> Date and place of your original entry to Canada	* Date <span style="background-color:yellow;">Date when you first came to Canada</span> YYYY-MM-DD	* Place <span style="background-color:yellow;">Port of Entry or City</span>
<b>2 * a) The original purpose for coming to Canada</b> <span style="background-color:yellow;">Answer base on your case</span>		b) Other
<b>3</b> Date and place of your most recent entry to Canada (if not the same as original entry)	Date <span style="background-color:yellow;">If you travelled outside Canada and came back, provide the date and the city</span> YYYY-MM-DD	Place
<b>4</b> If applicable, provide the document number of the most recent Visitor Record, Study Permit, Work Permit or Temporary Resident Permit issued to you.		Document Number <span style="background-color:yellow;">You can find this number in the top right corner of study permit. Usually start with F</span>

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

**DETAILS OF INTENDED STUDY IN CANADA**

1 I have been accepted at the following educational institution					
* a) Name of School <b>Red River College of Applied Arts, Science and Technology</b>		* My level of study will be: <b>Base on your case</b>		My field of study will be: <b>Base on your case</b>	
b) Complete address of school in Canada					
* Province <b>MB</b>	* City/Town <b>Winnipeg</b>	* Address <b>D210 - 2055 Notre Dame Avenue</b>			
2 Designated Learning Institution # (O#) <b>O19305836302</b>		My Student ID # is: <b>Base on your case</b>		3 Duration of expected study <b>Base on your case</b>	
* From YYYY-MM-DD		* To YYYY-MM-DD			
4 The cost of my studies will be:			5 * a) Funds available for my stay(CAD) * b) My expenses in Canada will be paid by: c) Other		
* Tuition <b>Base on your case</b>	Room and board	Other	<b>Base on your case</b>	<b>Base on your case</b>	
6 a) In addition to a study permit, are you also applying for a work permit? <input type="checkbox"/> * No <input type="checkbox"/> * Yes			b) What type of work permit are you applying for: <b>Base on your case</b>		
7 If you have been issued a Quebec Acceptance Certificate (CAQ), provide the:					
Certificate Number		Expiry Date			

If you are under the age of majority of the province/territory where you intend to study, you must fill out the *Custodian Declaration (IMM5646)* form.

**EDUCATION**

Have you had any post secondary education (including university, college or apprenticeship training)? <input type="checkbox"/> * No <input type="checkbox"/> * Yes			
If you answered "yes", give full details of your highest level of post secondary education. <b>Base on your case</b>			
1	From YYYY MM	Field and level of study <b>Highest level of education</b>	School/Facility name
	To YYYY MM	City/Town	Country Province/State

**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)			
1	From <b>Program Start date</b> *YYYY *MM	* Current Activity/Occupation <b>International Student/Current program name</b>	* Company/Employer/Facility name <b>Red River College</b>
	To <b>Program End date</b> YYYY MM	* City/Town <b>Winnipeg</b>	* Country <b>Canada</b> Province/State <b>MB</b>
2	From YYYY MM	Previous Activity/Occupation <b>Other past employment details base on your case</b>	Company/Employer/Facility name
	To YYYY MM	City/Town	Country Province/State
3	From YYYY MM	Previous Activity/Occupation	Company/Employer/Facility name
	To YYYY MM	City/Town	Country Province/State

Applicant Name

Date of Birth

**Following information is very important - read carefully and select appropriately. Wrong info may lead to refusal.**

**BACKGROUND INFORMATION**

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

<b>1</b>	<p>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? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>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? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>c) If you answered "yes" to question 1a) or 1b), please provide details.</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
<b>2</b>	<p>a) Have you ever remained beyond the validity of your status, attended school without authorization or worked without authorization in Canada? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>b) Have you ever been refused a visa or permit, denied entry or ordered to leave Canada or any other country? <b>2 c) would be yes.</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>c) Have you previously applied to enter or remain in Canada? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>d) If you answered "yes" to question 2a), 2b) or 2c), please provide details.</p> <div style="border: 1px solid black; padding: 10px;"> <p><b>Provide all details of previous refusal (as applicable) or any previous application to Canada. In most cases, the students would say - I applied for my Study Permit and it was approved. Give info as applicable in your case.</b></p> </div>
<b>3</b>	<p>a) Have you ever committed, been arrested for or been charged with or convicted of any criminal offence in any country? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>b) If you answered "yes" to question 3a), please provide details.</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
<b>4</b>	<p>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)? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>b) If you answered "yes" to question 4a), please provide dates of service and countries where you served.</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div>
<b>5</b>	<p>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? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
<b>6</b>	<p>Have you ever witnessed or participated in the ill treatment of prisoners or civilians, looting or desecration of religious buildings? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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?  No  Yes **Usually 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

**Online application: Type your name or leave this blank**

**Select date**



**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.

**DISCLOSURE**

Information provided to CIC is collected under the authority of the Immigration and Refugee Protection Act (IRPA) to determine admissibility to Canada. Information provided may be shared with other Canadian government institutions such as, but not limited to, the Canada Border Services Agency (CBSA), The Royal Canadian Mounted Police (RCMP), the Canadian Security Intelligence Service (CSIS), The Department of Foreign Affairs, Trade and Development (DFATD), Employment and Social Development Canada (ESDC), Canada Revenue Agency (CRA), provincial and territorial governments and foreign governments in accordance with subsection 8(2) of the Privacy Act. Information may be disclosed to foreign governments, law enforcement bodies and detaining authorities with respect to the administration and enforcement of immigration legislation where such sharing of information may not put the individual and or his/her family at risk. Information may also be systematically validated by other Canadian government institutions for the purposes of validating status and identity to administer their programs.

Where biometrics are provided as part 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.

Depending on the type of application made, the information you provided will be stored in one or more Personal Information Banks (PIB) pursuant to section 10(1) of Canada's Privacy Act. Individuals also have a right to protection and access to their personal information stored in each corresponding PIB under the Access to Information Act. Further details on the PIBs pertaining to CIC's line of business and services and the Government of Canada's access to information and privacy programs are available at the Infosource website (<http://infosource.gc.ca>) and through the CIC Call Centre. Infosource is also available at public libraries across Canada.