

APPLICATION FOR A PROTECTED PERSON STATUS DOCUMENT

For office use only
Client ID Number

Your full name

Family name

Given name(s)

I want service in

☐ English

☐ French

1. Other names you are or have been using
(including name at birth, previous married names, aliases)

2. Your date of birth

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

3. Place of Birth

Town/City

Country

4. Your country of citizenship

5. Your country of last permanent residence

6. Your sex

☐

Male

☐

Female

7. Your height

 cm

OR

 ft in

8. Your eye colour

9. Your current marital status

☐

Never married

☐

Married

☐

Widowed

☐

Legally separated

☐

Divorced

If you are married, date of your marriage

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

10. Your mailing address

No. and street

Apt. number

City

Province

Postal Code

11. Your residential address, if different from your mailing address

No. and street

Apt. number

City

Province

Postal Code

12. Your telephone numbers

Area code

Number

At home

Alternative

13. Determination of protected person status
(or Convention refugee status)

Date of determination

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

City

Province

14. Are you physically present in Canada?

☐

Yes

☐

No

15. Have you applied for permanent residence in Canada after you were determined to be a protected person?

☐

Yes

☐

No

If yes, on what date did you apply?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

16. Has your or a family member's status in Canada as a protected person been revoked?

☐

Yes

☐

No

Authority to release information

I give consent to release all information to the following person:

Name of individual

Name of firm

Do you want all documents and correspondence mailed to this address?

☐ Yes☐ No**Address of representative**

Declaration

This declaration covers the information I have provided on this application form and the accompanying documents.

- I declare that the information I have given is truthful, complete and correct.
- I understand that any false statements or concealment of a material fact may be grounds for my prosecution or removal.
- I understand all the foregoing statements, having asked for and obtained an explanation on every point that was not clear to me.
- I will immediately inform the Citizenship and Immigration Canada if any of the information or the answers provided in my application forms change.

Signature

Date

Declaration of Interpreter

I have faithfully and accurately interpreted in _____ the complete contents of this application.
(the language)

Name

Place signed

Relationship
to applicant

Signature of
interpreter

Date _____

THE INFORMATION YOU PROVIDE ON THIS DOCUMENT IS COLLECTED UNDER THE AUTHORITY OF THE *IMMIGRATION AND REFUGEE PROTECTION ACT* TO ASSESS YOUR REQUEST FOR A PROTECTED PERSON STATUS DOCUMENT. THIS INFORMATION WILL BE STORED IN PERSONAL INFORMATION BANK C1C PPU 066. IT IS PROTECTED AND YOU HAVE THE RIGHT OF ACCESS TO IT UNDER THE *PRIVACY ACT*.