



CUSTODIANSHIP DECLARATION - CUSTODIAN FOR MINORS STUDYING IN CANADA

STUDENT INFORMATION

| | | | | |
|---|---------------|-------------|--|--|
| Family name | Given name(s) | Citizenship | Date of birth Y M D | Sex <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Name and address of school in Canada | | | | |
| Address where student will reside in Canada | | | | |

PARENTS/GUARDIANS INFORMATION (Preferably from both parents/guardians)

| | Parent/Guardian 1 | | Parent/Guardian 2 | |
|------------------|---|---------------|---|---------------|
| Full name | Family name | Given name(s) | Family name | Given name(s) |
| Date of birth | Y M D | | Y M D | |
| Home address | | | | |
| Telephone number | | | | |

CUSTODIAN INFORMATION

| | | | |
|--|---------------|---|--|
| Family name | Given name(s) | Status in Canada <input type="checkbox"/> Canadian citizen or <input type="checkbox"/> Permanent resident | Date of birth Y M D |
| Home address | | | Telephone no. |
| Custodian's email address: (Please provide one that is not with yahoo, hotmail, msn, outlook or sina.com) | | | |

The application of the official seal below confirms that the notary public has received evidence that the custodian is a Canadian citizen or a permanent resident, is over 19 years of age, and currently resides at the home address stated above.

I, _____ (name of custodian), hereby solemnly declare that I will undertake the full custodianship for the said student, _____ (name of student), during his/her stay in Canada, while under the age of majority in the province in which he/she resides. As a custodian, I have made the necessary arrangements for the care and support of the said student in place of the parents as appropriate. By signing this custodian agreement, I certify that I reside within a reasonable distance of the student's intended residence and school and will be able to fulfil my obligations as a custodian in the event of an emergency.

Signature of custodian

| | | |
|------|-------|-----|
| Year | Month | Day |
| | | |

Date

Sworn before me at: _____ (city), in the province of _____ (province/territory), _____ country (if applicable).

This _____ day of _____ (month), _____ (year).

Signature of notary

OFFICIAL SEAL OF NOTARY PUBLIC

