



APPLICATION TO CHANGE CONDITIONS, EXTEND MY STAY OR REMAIN IN CANADA AS A VISITOR OR TEMPORARY RESIDENT PERMIT HOLDER

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

1 UCI 1108828325	2 * I want service in English	OFFICE USE ONLY Validated Yes
3 I am applying for one or more of the following: <div>* Extend my status as a visitor ✓ * Restore my status as a visitor * Get a new temporary resident permit (for inadmissible applicants only)</div>		

PERSONAL DETAILS

1 Full name * Family name (as shown on your passport or travel document) Beznec		Given name(s) (as shown on your passport or travel document) Cody Dylan	
2 a) Have you ever used any other name (e.g. Nickname, maiden name, alias, etc.) ? ✓ * No * Yes b) If you answered "yes" to question 2a), please provide the name (e.g. Nickname, maiden name, alias, etc.) Family name Given name(s)			
3 Sex M Male	4 Date of birth 1991 03 31 * YYYY * MM * DD	5 Place of birth * City/Town Takapuna * Country or Territory New Zealand	
6 * Citizenship New Zealand			
7 Current country or territory of residence:			
Country or Territory	Status	Other	From To
* Canada	* Other	Visitor Status Expired	2024-06-20 2024-06-30 YYYY-MM-DD YYYY-MM-DD
8 a) Previous countries or territories of residence: 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? * No ✓ * Yes b) If you answered "yes" to question 8a), please provide details			
Country or Territory	Status	Other	From To
Australia	Permanent resident		2018-09-11 2019-10-19 YYYY-MM-DD YYYY-MM-DD
			YYYY-MM-DD YYYY-MM-DD
9 * a) Your current marital status Common-Law		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 2018-05-20 YYYY-MM-DD	
c) Provide the name of your current Spouse/Common-law partner *Family name Cudmore Given name(s) Alyson Margaret			
d) If you are married or in a common-law relationship, is your spouse or common-law partner a Canadian citizen or permanent resident? *No ✓ *Yes			
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 Beznec, C.	Date of Birth 1991-03-31
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PERSONAL DETAILS (CONTINUED)

10 a) Have you previously been married or in a common-law relationship? <input checked="" type="checkbox"/> * No <input type="checkbox"/> * Yes			
b) Provide the following details for your previous Spouse/Common-law partner:			
Family name <div></div>		Given name(s) <div></div>	
c) Type of relationship <div></div>	d) From YYYY-MM-DD <div></div>	To YYYY-MM-DD <div></div>	e) Date of Birth YYYY MM DD <div></div>

LANGUAGE(S)

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

PASSPORT

1 * Passport number LM456310	2 * Country or territory of issue NZL (New Zealand)	3 * Issue date 2018-01-23 YYYY-MM-DD	4 * Expiry date 2028-01-23 YYYY-MM-DD
5 * 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			
6 * For this trip, will you use a National Israeli passport? <input type="checkbox"/> No <input type="checkbox"/> Yes			

NATIONAL IDENTITY DOCUMENT

1 Do you have a national identity document? <input checked="" type="checkbox"/> No <input type="checkbox"/> * Yes			
2 Document number <div></div>	3 Country or territory of issue <div></div>	4 Issue date YYYY-MM-DD <div></div>	5 Expiry date YYYY-MM-DD <div></div>

US PR CARD

1 Are you a lawful Permanent Resident of the United States with a valid alien registration card (green card)? <input checked="" type="checkbox"/> No <input type="checkbox"/> * Yes	
2 Document number <div></div>	3 Expiry date YYYY-MM-DD <div></div>

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.

1 Current mailing address					
P.O. box	Apt/Unit	Street no. 23	* Street name Spruce Ct		
* City/Town Brackley Beach	* Country or Territory Canada		* Province PE	* Postal code C1E 2X7	
2 Residential address Same as mailing address? <input type="checkbox"/> * No <input checked="" type="checkbox"/> * Yes					
Apt/Unit	Street no.	Street name			
City/Town	Country or Territory		Province	Postal code	
3 Telephone no. <input checked="" type="checkbox"/> *Canada/US <input type="checkbox"/> Other			4 Alternate Telephone no. Canada/US <input type="checkbox"/> Other <input type="checkbox"/>		
*Type Cellular	Country Code 1	*No. (902)	Ext. 916 — 4985		
5 Fax no. Canada/US <input type="checkbox"/> Other <input type="checkbox"/>			6 E-mail address cdbeznec@outlook.com		

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COMING INTO CANADA

1	Date and place of your original entry to Canada	* Date 2023-06-06 YYYY-MM-DD	* Place Toronto
2	* a) The original purpose for coming to Canada Family Visit	b) Other	
3	Date and place of your most recent entry to Canada (if not the same as original entry)	Date YYYY-MM-DD	Place
4	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 C302186991	

DETAILS OF VISIT TO CANADA

1	* a) Purpose of my visit Other	*b) Other Applying for Spouse Sponsorship Visa		
2	Indicate how long you plan to stay	* From 2024-06-27 YYYY-MM-DD	* To 2024-12-27 YYYY-MM-DD	
3	* a) Funds available for my stay (CAD) \$40,000	* b) My expenses in Canada will be paid by: Myself	c) Other	
4	Name, address and relationship of any person(s) or institution(s) I will visit:			
1	* Name Jamie Cudmore			
	Relationship to me Father In Law	* Address in Canada 23 Spruce Court, Brackley Beach PE		
2	Name			
	Relationship to me	Address in Canada		

EDUCATION

Have you had any post secondary education (including university, college or apprenticeship training)?					* No	<input checked="" type="checkbox"/>	* Yes
If you answered "yes", give full details of your highest level of post secondary education.							
1	From 2010 06 *YYYY *MM	*Field and level of study Carpentry Level 4	*School/Facility name BCITO NZ				
	To 2014 06 *YYYY *MM	*City/Town Kapiti	*Country or Territory New Zealand	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 2020 01 *YYYY *MM	* Current Activity/Occupation Construction business/ Self employed	* Company/Employer/Facility name Mint Home Solutions				
	To 2023 11 *YYYY *MM	* City/Town Palmerston North	* Country or Territory New Zealand	Province/State			
2	From 2018 09 *YYYY *MM	*Previous Activity/Occupation Carpenter	*Company/Employer/Facility name Uncle Bobs Carpentry				
	To 2019 10 *YYYY *MM	*City/Town North Ryde	*Country or Territory Australia	Province/State			

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EMPLOYMENT (CONTINUED)

3	From	2014 06 *YYYY *MM	*Previous Activity/Occupation Carpenter	*Company/Employer/Facility name Dwyer Tech Services
	To	2018 03 *YYYY *MM	*City/Town Palmerston North	*Country or Territory New Zealand
			Province/State <div style="background-color: #cccccc; height: 20px; width: 100%;"></div>	

BACKGROUND INFORMATION

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

1	<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? ✓ *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? ✓ *No <input type="checkbox"/> *Yes</p> <p>c) If you answered "yes" to question 1a) or 1b), please provide details.</p> <div style="background-color: #cccccc; height: 100px; width: 100%;"></div>
2	<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 ✓ *Yes</p> <p>b) Have you ever been refused a visa or permit, denied entry or ordered to leave Canada or any other country or territory? ✓ *No <input type="checkbox"/> *Yes</p> <p>c) Have you previously applied to enter or remain in Canada? ✓ *No <input type="checkbox"/> *Yes</p> <p>*d) If you answered "yes" to question 2a), 2b) or 2c), please provide details.</p> <p>I have overstayed my current visitor visa by just over one week. I left my renewal to the absolute last minute and had trouble with the forms and wasn't able to get it completed in time.</p>
3	<p>a) Have you ever committed, been arrested for or been charged with or convicted of any criminal offence in any country or territory? ✓ *No <input type="checkbox"/> *Yes</p> <p>b) If you answered "yes" to question 3a), please provide details.</p> <div style="background-color: #cccccc; height: 100px; width: 100%;"></div>
4	<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)? ✓ *No <input type="checkbox"/> *Yes</p> <p>b) If you answered "yes" to question 4a), please provide dates of service and countries or territories where you served.</p> <div style="background-color: #cccccc; height: 100px; width: 100%;"></div>

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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 as a means to achieving a political or religious objective, or which has been associated with criminal activity at any time?	<input checked="" type="checkbox"/> *No	<input type="checkbox"/> *Yes
6	Have you ever witnessed or participated in the ill treatment of prisoners or civilians, looting or desecration of religious buildings?	<input checked="" type="checkbox"/> *No	<input type="checkbox"/> *Yes

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 consent to the release to Citizenship and Immigration Canada (CIC) and Canada Border Services Agency (CBSA) of all records and information for the purpose of processing my request that any government authority, including police, judicial and state authorities in all countries in which I have lived may possess about me. This information will be used to evaluate my suitability for admission to Canada or to remain in Canada pursuant to Canadian legislation.

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
Cody Beznec	2024-06-27



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.

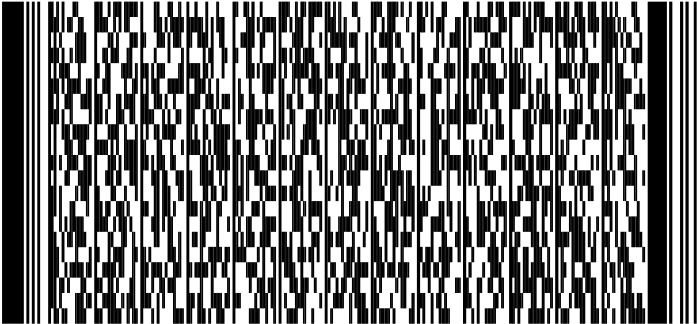
The personal information collected on an application, and other information collected in support of an application, may be used for computer analytics to support processing of applications and decision making, including your application. Personal information, including from advanced analytics, automation, 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.

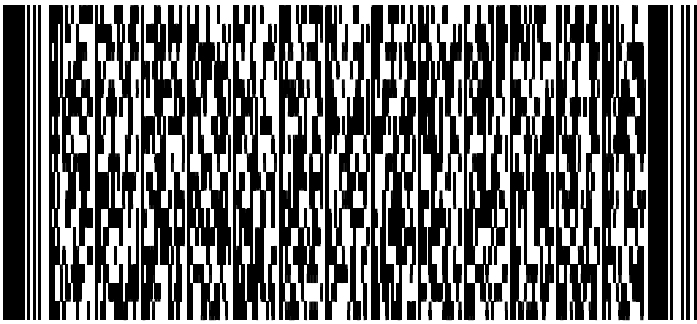
Failure to complete the form in full may result in a delay or the application not being processed. The Privacy Act gives individuals the right of access to, protection, and correction of their personal information. Further details are available in [Info Source](#). If you are not satisfied with the manner 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 068](#).

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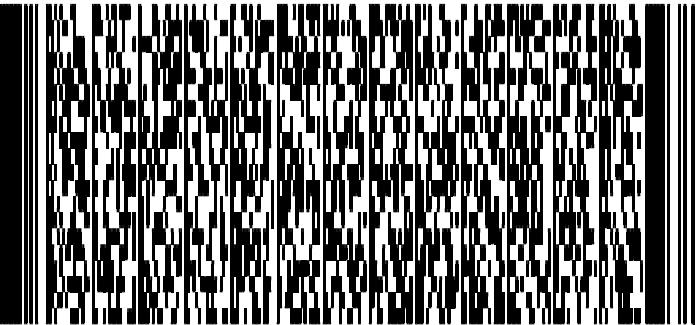
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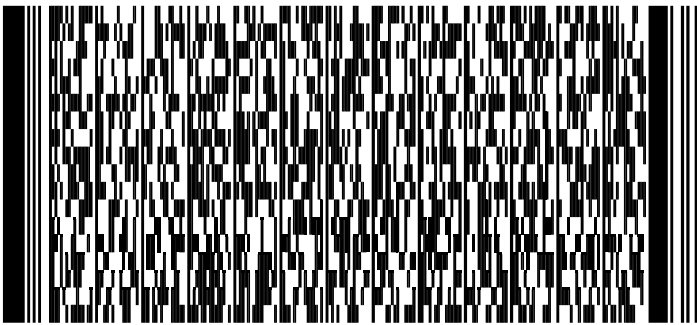
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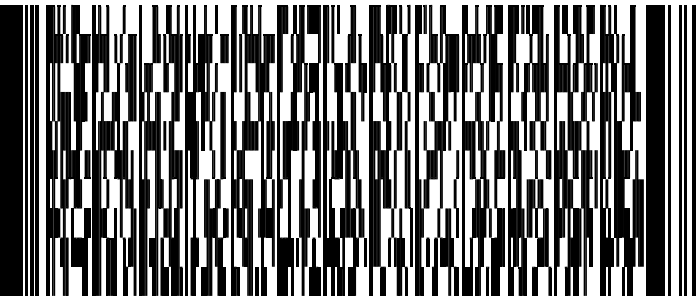
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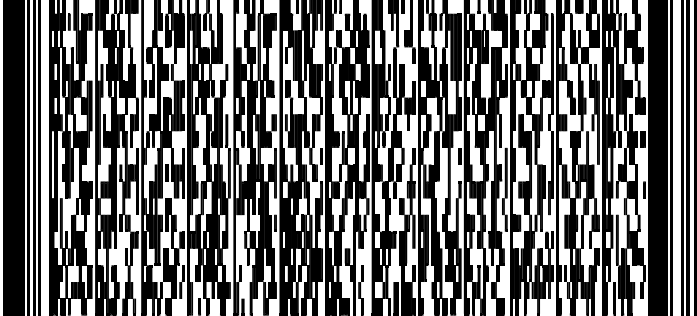
IMM5708_06-2018_3



IMM5708_06-2018_4



IMM5708_06-2018_5



IMM5708_06-2018_6