



March 29, 2015

UCI: 52245298

Jocelyn Subala  
C/O Zara Canda  
21585-1424 Commercial Dr  
Vancouver BC V5L 3X9

This refers to your application for a Work Permit received February 26, 2015.

An application to change conditions or extend your stay in Canada can only be considered as having been made if it is made on the prescribed forms and if it is accompanied by the required fees and all supporting documents. The entire application package is being returned to you for the following reason(s):

[X] You have submitted \$**100.00** with your application. The correct amount required is \$**155.00** for the services you requested.

We cannot take any action in your case until such time as you resubmit **your entire application** with a copy of this letter and the following item(s):

[X] An application to change conditions or extend your stay in Canada must be made on or prior to the expiry of your current document or passport stamp. When the period allowed for your stay has expired, you no longer have temporary resident status in Canada. **Please note** that your temporary resident status was valid until **March 22, 2015**. If you wish to be considered for restoration of your temporary resident status, you must include the applicable fee in the amount of \$ **200.00**, for a total amount owing of \$**355.00**. This amount includes processing and restoration fees for yourself and if applicable, for any family member(s) included in your application. Payments should be made online at [www.cic.gc.ca](http://www.cic.gc.ca). When you are finished, you must print a receipt of payment and include it with your application. If you are unable to pay online, please contact the Immigration Call Centre, toll free, at 1-888-242-2100.

**To be considered for restoration of your temporary resident status, you must resubmit the entire application within 90 days of the expiry of your status. Failure to submit within this time frame may result in refusal of your application.**

**Should you choose not to apply for restoration of your status, you will remain a person without legal Temporary Resident Status and as such will be required to leave Canada immediately. If you do not leave Canada voluntarily, enforcement action may be taken against you.**

**Note: Passports must be valid for the duration of your stay in Canada. Documents will not be issued beyond the validity of passports.**

**When should I contact CIC?**

You must notify Citizenship and Immigration Canada (CIC) of any changes to your application. Examples of changes include:

- Change of contact information (e-mail, mailing address, telephone number);
- Appointment or change of immigration representative or designated individual;
- Decision to withdraw your application.

You may also contact the Call Centre, toll-free, at 1-888-242-2100. Changes to your address should be made through our online service at [www.cic.gc.ca/english/information/change-address.asp](http://www.cic.gc.ca/english/information/change-address.asp).

### **How long will it take to process my application?**

Processing times vary. You can consult the processing times by visiting the CIC website at [www.cic.gc.ca/english/information/times/temp.asp](http://www.cic.gc.ca/english/information/times/temp.asp). Please note that, given the high volume of inquiries submitted to this office and Canadian visa offices abroad, status updates on cases are not normally provided unless the processing time for a file is longer than the service standards outlined in the CIC website.

Sincerely,

**Officer DYF/RTR**  
**Case Processing Centre Vegreville**



Citizenship and  
Immigration CanadaCitoyenneté et  
Immigration Canada

## Official Receipt - Reçu officiel

R119122449



ON-LINE - CIC EN LIGNE

1-888-242-2100 Hours (local time)/Heures (heure locale): 08:00 - 16:00

ACCT - COMPTE

VISA \$100.00

CARD NUMBER - NUMÉRO DE LA CARTE 45#####3191

RECEIPT NUMBER - NUMÉRO DU REÇU R119122449

DATE OF PAYMENT - DATE DU PAIEMENT 15-02-22 17:35:16 EST

Approved - Thank You - Approuvée - Merci

Payer Information - Renseignement de l'agent payeur

5224 5298

Name - Nom zero canda		Client date of birth - Date de naissance du client D I M Y-A 2 5 0 4 7 0	Client ID - Identification du client
Address - Adresse 8851 Patterson Road Richmond, BC			
Postal Code - Code postal V 6 X 1 P 5	Area Code - Ind. rég. ( 604 )	Telephone No. - No de téléphone 7 2 0 - 2 5 9 6	

Please print two copies of this receipt, send one to Citizenship and Immigration Canada and keep one for your records. Please also note that the payer's name on this receipt does not have to be the same as the one on the application form. - Veuillez imprimer 2 copies de ce reçu, envoyer une copie à Citoyenneté et Immigration Canada et conserver l'autre pour vos dossiers. Veuillez aussi noter que le nom du payeur sur ce reçu n'a pas à être le même que celui sur le formulaire d'application.

Paid for Jocelyn SUBALA

**APPLICATION TO CHANGE CONDITIONS,  
EXTEND MY STAY OR REMAIN IN CANADA AS A WORKER***Open Work Permit  
extension*

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

~~FEB 26 2015~~

<b>1 UCI</b> 52245298		<b>2 * I want service in</b> English		<b>OFFICE USE ONLY</b> Validated Yes	
<b>3 I am applying for one or more of the following:</b> <input checked="" type="checkbox"/> * A work permit with the same employer <input type="checkbox"/> * Restoration of your status as a worker <input type="checkbox"/> * An initial work permit or a work permit with a new employer <input type="checkbox"/> * Temporary Resident Permit					
<b>PERSONAL DETAILS</b>					
<b>1 Full name</b> * Family name (as shown on your passport or travel document) SUBALA Given name(s) (as shown on your passport or travel document) Jocelyn Sabiniano					
<b>2 a) Have you ever used any other name (e.g. Nickname, maiden name, alias, etc.) ?</b> <input type="checkbox"/> * No <input checked="" type="checkbox"/> * Yes b) If you answered "yes" to question 2a), please provide the name (e.g. Nickname, maiden name, alias, etc.) * Family name SABINIANO Given name(s) Jocelyn					
<b>3 * Sex</b> Female	<b>4 Date of birth</b> 1970 04 25 * YYYY * MM * DD		<b>5 Place of birth</b> * City/Town San Fernando LAU * Country Philippines		
<b>6 * Citizenship</b> Philippines					
<b>7 Current country of residence:</b>					
Country		Status	Other	From	To
Canada		Worker		2007-09-14 YYYY-MM-DD	2015-03-30 YYYY-MM-DD
<b>8 a) Previous countries of residence:</b> 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 checked="" type="checkbox"/> * No <input type="checkbox"/> * Yes b) If you answered "yes" to question 8a), please provide details					
Country		Status	Other	From	To
				YYYY-MM-DD	YYYY-MM-DD
				YYYY-MM-DD	YYYY-MM-DD
<b>9 * a) Your current marital status</b> Married		<b>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</b>			<b>* Date</b> 2007-09-10 YYYY-MM-DD
c) Provide the name of your current Spouse/Common-law partner * Family name SUBALA		Given name(s) Clarence Estano			
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 checked="" type="checkbox"/> * No <input type="checkbox"/> * Yes					
FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE					

This form is made available by Citizenship and Immigration Canada and is not to be sold to applicants.

(DISPONIBLE EN FRANÇAIS - IMM 5710 F)



Applicant Name SUBALA, J.	Date of Birth 1970-04-25
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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		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 Ilocano	*b) If your native language is not English or French, which language do you use most frequently? English	2 *Are you able to communicate in English and/or French? English
3 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 EB4231192	2 * Country of issue Philippines	3 * Issue date 2011-12-08 YYYY-MM-DD	4 * Expiry date 2016-12-07 YYYY-MM-DD
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**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 <b>Current mailing address</b>					
P.O. box	Apt/Unit	Street no. 8851	* Street name Patterson Road		
* City/Town Richmond	* Country Canada	* Province BC	* Postal code V6X 1P5		
2 <b>Residential address</b> Same as mailing address? <input type="checkbox"/> * No <input checked="" type="checkbox"/> * Yes					
Apt/Unit	Street no.	Street name			
City/Town	Country	Province	Postal code		
3 <b>Telephone no.</b> <input checked="" type="checkbox"/> Canada/US <input type="checkbox"/> Other			4 <b>Alternate Telephone no.</b> <input type="checkbox"/> Canada/US <input type="checkbox"/> Other		
*Type Cellular	Country Code 1	*No. ( 604 )	Ext. 720	Type	Country Code No. Ext.
5 <b>Fax no.</b> <input type="checkbox"/> Canada/US <input type="checkbox"/> Other			6 <b>E-mail address</b> jocelynsbala@yahoo.com		

**COMING INTO CANADA**

1 Date and place of your original entry to Canada Canada	* Date 2007-09-14 YYYY-MM-DD	* Place Vancouver airport
2 * a) The original purpose for coming to Canada Work	b) Other	
3 Date and place of your most recent entry to Canada (if not the same as original entry)	* Date 2009-06-07 YYYY-MM-DD	* Place Vancouver airport
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	



Applicant Name

SUBALA, J.

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**DETAILS OF INTENDED WORK IN CANADA**

1	* a) What type of work permit are you applying for? Open Work Permit		b) Other	
2	Details of my prospective employer (attach original offer of employment)			
*a) Name of Employer (If you are employed by a foreign employer who has been awarded a contract to provide services to a Canadian entity, please identify the foreign employer here) A & W Restaurant (A&W 161 Lansdowne)				
*b) Complete Address of Employer (Canadian or Foreign): 1035-5300 No. 3 Road				
3	Intended location of employment in Canada?			
	*Province BC	*City/Town Richmond, BC	*Address 1035-5300 No. 3 Road, Richmond, BC, V6X 2X9	
4	My occupation in Canada will be: *Job title Food Counter Attendant		*Brief description of duties Making sandwiches, cashier, food preparation	
5	Duration of expected employment	*From 2015-03-22 YYYY-MM-DD	*To 2020-03-21 YYYY-MM-DD	6 Labour market opinion (LMO) No.
7	If you have been issued a Quebec Acceptance Certificate (CAQ), provide the:			
	Certificate Number	Expiry Date		
8	Have you been issued a certificate under the Provincial Nominee program? <input checked="" type="checkbox"/> * No <input type="checkbox"/> * Yes			

**EDUCATION**

Have you had any post secondary education (including university, college or apprenticeship training)? <input type="checkbox"/> * No <input checked="" type="checkbox"/> * Yes				
If you answered "yes", give full details of your highest level of post secondary education.				
1	From 1990 06 *YYYY *MM	*Field and level of study Early Childhood Education	*School/Facility name Union Christian College	
	To 1994 03 *YYYY *MM	*City/Town San Fernando	*Country Philippines	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 2010 11 *YYYY *MM	*Current Activity/Occupation Food Counter Attendant	*Company/Employer/Facility name A & W Restaurant (A&W 161 Lansdowne)	
	To 2015 03 *YYYY *MM	*City/Town Richmond	*Country Canada	*Province/State BC
2	From 2007 09 *YYYY *MM	*Previous Activity/Occupation Live-in Caregiver	*Company/Employer/Facility name Trisanta CARMICHAEL	
	To 2010 11 *YYYY *MM	*City/Town Richmond	*Country Canada	*Province/State BC
3	From 2005 02 *YYYY *MM	*Previous Activity/Occupation Unemployed - studying caregiver course	*Company/Employer/Facility name Union Christian College	
	To 2007 09 *YYYY *MM	*City/Town San Fernando	*Country Philippines	Province/State



Applicant Name

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**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?</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?</p> <p>c) If you answered "yes" to question 1a) or 1b), please provide details and the name of the family member (if applicable).</p> <div style="background-color: #cccccc; height: 100px; width: 100%;"></div>	<p><input checked="" type="checkbox"/> *No    <input type="checkbox"/> *Yes</p> <p><input checked="" type="checkbox"/> *No    <input type="checkbox"/> *Yes</p>
<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?</p> <p>b) Have you ever been refused a visa or permit, denied entry or ordered to leave Canada or any other country?</p> <p>c) Have you previously applied to enter or remain in Canada?</p> <p>*d) If you answered "yes" to question 2a), 2b) or 2c), please provide details.</p> <div style="border: 1px solid black; padding: 5px;"> <p>In 2003 I applied for work permit as a caregiver at the Canadian embassy in Manila. My application at that time was rejected on grounds that I did not have a caregiver training certificate.</p> </div>	<p><input checked="" type="checkbox"/> *No    <input type="checkbox"/> *Yes</p> <p><input type="checkbox"/> *No    <input checked="" type="checkbox"/> *Yes</p> <p><input type="checkbox"/> *No    <input checked="" type="checkbox"/> *Yes</p>
<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?</p> <p>b) If you answered "yes" to question 3a), please provide details.</p> <div style="background-color: #cccccc; height: 100px; width: 100%;"></div>	<p><input checked="" type="checkbox"/> *No    <input type="checkbox"/> *Yes</p>
<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)?</p> <p>b) If you answered "yes" to question 4a), please provide dates of service and countries where you served.</p> <div style="background-color: #cccccc; height: 100px; width: 100%;"></div>	<p><input checked="" type="checkbox"/> *No    <input type="checkbox"/> *Yes</p>
<b>5</b>	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?	<p><input checked="" type="checkbox"/> *No    <input type="checkbox"/> *Yes</p>
<b>6</b>	Have you ever witnessed or participated in the ill treatment of prisoners or civilians, looting or desecration of religious buildings?	<p><input checked="" type="checkbox"/> *No    <input type="checkbox"/> *Yes</p>



Applicant Name

SUBALA, J.

Date of Birth

1970-06-25

**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

2015-02-21

**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**

The information you provide on this form is collected under the authority of the Immigration and Refugee Protection Act to determine if you may be admitted to Canada as a worker. It will be stored in Personal Information Banks (PPU 054 Temporary Worker Records and Case File) CIC. The information may be shared with other Canadian government institutions such as the Canada Border Services Agency (CBSA), the Department of Foreign Affairs and International Trade Canada (DFAIT), the Royal Canadian Mounted Police (RCMP), the Canadian Security Intelligence Service (CSIS), and foreign governments in accordance with subsection 8(2) of the Privacy Act. Information may also 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 under the terms of an agreement or arrangement for the purposes of validating status and identity to administer their programs. In accordance with the Privacy Act and the Access to Information Act, individuals have a right to protection of and access to their personal information. Details on these matters are available at the Info Source website (<http://infosource.gc.ca>) and through the Citizenship and Immigration Canada Call Centre.



Applicant Name

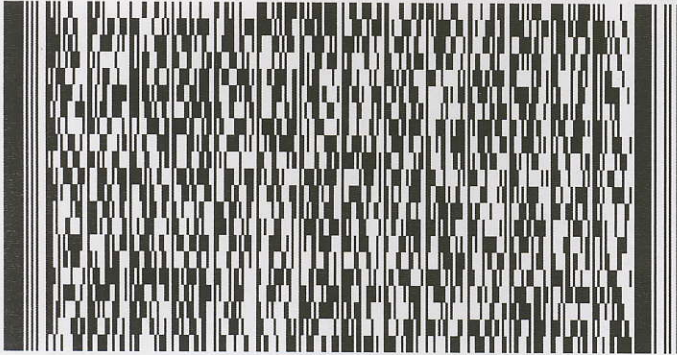
SUBALA, J.

~~XLW 301 308 193~~

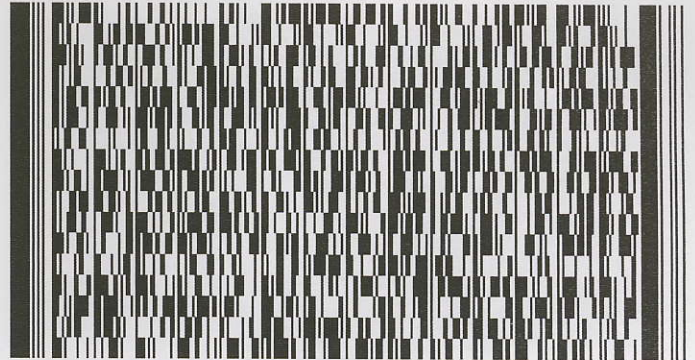
Date of Birth

1970-04-25

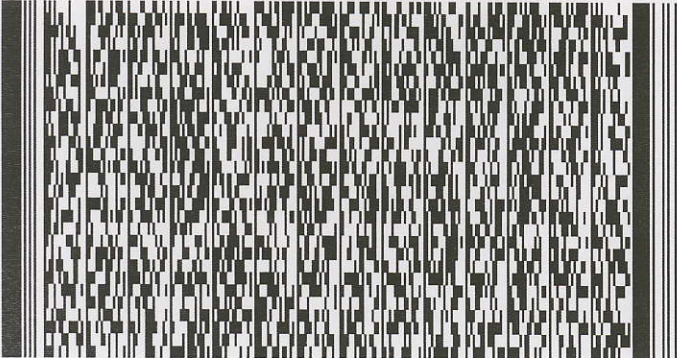
**APPLICATION TO CHANGE CONDITIONS,  
EXTEND MY STAY OR REMAIN IN CANADA AS A WORKER**



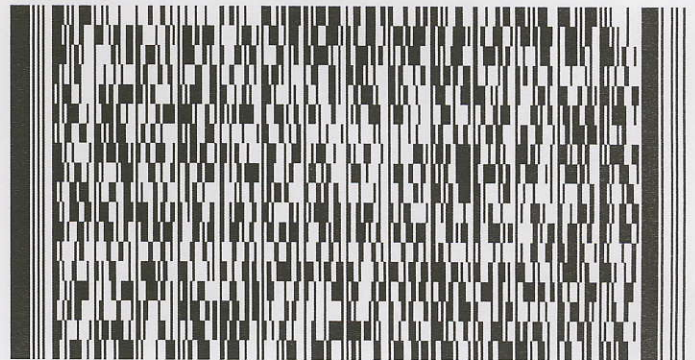
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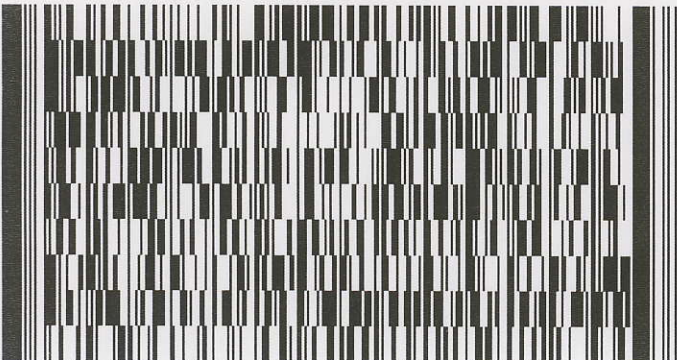
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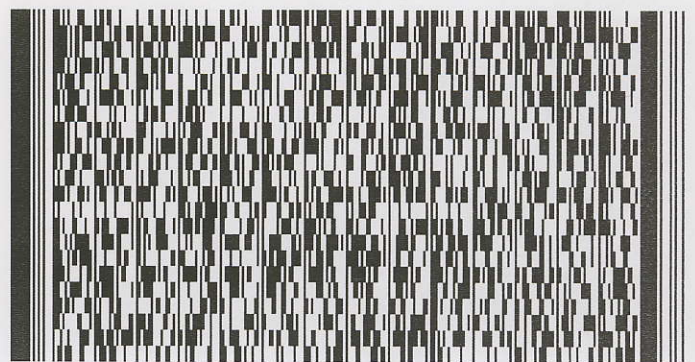
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