## **USE OF A REPRESENTATIVE**

You do not need to hire a representative, it is your choice. No one can guarantee the approval of your application. All the forms and information that you need to apply are available for free at www.cic.gc.ca.

A representative is someone who has provided advice or guidance to you at any stage of the application process, whether that person received consideration (i.e. compensation) or not. Following the submission of your application, that person may conduct business on your behalf with Citizenship and Immigration Canada (CIC) and the Canada Border Services Agency (CBSA) if you appoint them as your representative by filling out this form. The preceding includes Express Entry submissions. You may have **one** representative only per application. If you appoint an additional representative, the previous representative will no longer be authorized to conduct business on your behalf and receive information on your case file.

**Note:** You must use this form to appoint a paid or unpaid representative to conduct business with CIC or the CBSA on your behalf. You must also use this form to: 1. notify CIC if your representative's contact information changes, 2. if you wish to cancel the appointment of your current representative and represent yourself, or, 3. if you wish to cancel the appointment of your current representative and appoint a new representative

	appointing a representative. Complete S	Sections A, B and D.				
	cancelling the appointment of a represer	ntative. Complete Section A, C and D.				
SEC	TION A: APPLICANT INFORMATION					
1.	Your full name					
	Family name (Surname)					
	Given name(s)					
2.	Your date of birth	(YYYY-MM-DD)				
3.	If you have already submitted your application:		_			
	Name of office where the application was submitted					
	Type of application (permanent residence, extension of study permit, citizenship, etc.)					
4.	Your Citizenship and Immigration Canada Identification nu	mber (if known)				
	Client Identification (ID) or Unique Client Identifier (UCI) number					
SEC	TION B: APPOINTMENT OF REPRESENTATIVE					
	compensated representative.  I authorize Citizenship and Immigration Canada and Ca 18 years of age to my representative. This authorization	g paid or compensated by someone other than you (the appropriate a	ollicant), the representative is still considered to be a my case file and that of my dependent children under			
	<ul> <li>I am aware that any information which would be subject released.</li> </ul>	to exemption, if I had the right of access under the <i>Privacy</i>	Act or the Access to Information Act, will likely not be			
5.	Your representative's full name Family name (Surname)					
	Given name(s)					
6.	Your representative: (choose one)					
	is UNCOMPENSATED and is a:					
	family member or friend					
	member of a non-governmental or religious organization					
	member of the Immigration Consultants of Canada Regulatory Council (ICCRC), a Canadian provincial or territorial law society, or the <i>Chambre des notaires</i> du Québec					
	other					
is or will be COMPENSATED and is a member in good standing of:						
	the Immigration Consultants of Canada Regulat	tory Council (ICCRC)	٦			
	Membership ID number					
	a Canadian provincial or territorial law society		7			
	Which province or territory?					
	Membership ID number					
	the Chambre des notaires du Québec		7			
	Membership ID number					



Name of firm or organizati	on (if applicable)		
If student-at-law, write the	name of the supervising lawyer		Supervising lawyer membership ID
Mailing address			
<u> </u>			
Postal code/ZIP			
Talanhanananahan	Occuptors and a Associated	Niverban	
Telephone number	Country code Area code ( )	Number	
Fax number	Country code Area code	Number	
Email address (if applicab	( )		
Linaii address (ii applicab			
By indicating your representations and address.	esentative's e-mail address, you	are hereby authorizing Citizenship and Im	migration Canada to transmit your file and personal information to this
Your representative's	declaration:		
I declare that the in	formation in Section B is truthful,	complete and correct.	
	ccept that I am the person apportant appropriate that I am the person apportant that I am the person appropriate the person appropriate that I am the person appropriate the I am the person appropriate the I am the person appropriate the I am the	pinted by the applicant to conduct business	on the applicant or sponsor's behalf with Citizenship and Immigration
Signature of represe	entative		
Date		(YYYY-MM-DD)	
CTION C. CANCEL THE	APPOINTMENT OF A REPRES	PENTATIVE	
	ation for this person to serve as n nd Canada Border Services Agen		my case file and to conduct business on my behalf with Citizenship and
Your representative's	full name		
Family name (Surname	<b>;</b> )		
Given name(s)			
Name of firm or organiz	zation		
(if applicable)			
(if applicable)  CTION D: YOUR DECLA			
(if applicable) CTION D: YOUR DECLA Your declaration	RATION		
(if applicable)  CTION D: YOUR DECLA  Your declaration  I declare that I have	RATION e fully and truthfully answered all	questions on this form and any attached apple statements on this form, having asked and	olication (if applicable). obtained an explanation for every point that was not clear to me.
(if applicable)  CTION D: YOUR DECLA  Your declaration  I declare that I have	RATION  e fully and truthfully answered all have read and understood all the		
(if applicable)  CTION D: YOUR DECLA  Your declaration  I declare that I have I also declare that I	RATION  e fully and truthfully answered all have read and understood all the		
(if applicable)  CTION D: YOUR DECLA  Your declaration  I declare that I have I also declare that I  Signature of applica  Date  Signature of spouse	ARATION  e fully and truthfully answered all have read and understood all the ant	e statements on this form, having asked and	
(if applicable)  CTION D: YOUR DECLA  Your declaration  I declare that I have I also declare that I  Signature of applica  Date	ARATION  e fully and truthfully answered all have read and understood all the ant	e statements on this form, having asked and	

Warning! It is a serious offence to give false or misleading information on this form.

The information you provide on this form is collected under the authority of the *Immigration and Refugee Protection Act* and the *Citizenship Act* and will be used in assessing your application according to the requirements of the Act. It will be retained in a Personal Information Bank identified in **Infosource**. The information may be shared with other organizations such as the Canada Border Services Agency (CBSA), the Royal Canadian Mounted Police (RCMP), the Canadian Security and Intelligence Service (CSIS), where there is an agreement or arrangement with a foreign government, in accordance with subsection 8(2) of the *Privacy Act*. Pursuant to the *Immigration and Refugee Protection Regulations* and the *Citizenship Regulations*, the information may also be shared with a regulatory body that is responsible for governing or investigating the conduct of representatives, such as a provincial and territorial law society, the *Chambre des Notaires du Québec* and the Immigration Consultants of Canada Regulatory Council (ICCRC). Under the *Privacy Act* and the *Access to Information Act* individuals have the right to protection of and access to their personal information. Details on these matters are available at infosource.gc.ca. **Infosource is also available in Canadian public libraries**.