



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 on the [Immigration, Refugees and Citizenship Canada \(IRCC\) Website](#).

By filling out this form, you are appointing a representative to conduct business on your behalf throughout the application process. Your representative will be able to complete or update your application and act on your behalf with Immigration, Refugees and Citizenship Canada (IRCC) and the Canada Border Services Agency (CBSA). You may only have **one** representative at a time per application. If you appoint a new representative, the previous representative will no longer be authorized to conduct business on your behalf and receive information on your application.

Note: You must use this form to appoint a paid or unpaid representative to conduct business with IRCC or the CBSA on your behalf. You must also use this form: 1. to notify IRCC if your representative's contact information changes, 2. if you wish to cancel the appointment of your current representative and represent yourself, 3. if you wish to cancel the appointment of your current representative and appoint a new representative or, 4. to withdraw yourself as the representative on the application

I am:

- ☐ appointing a representative. **Complete Sections A, B and E.**
- ☐ updating contact information of an appointed representative. **Complete Sections A, B and E.**
- ☐ cancelling the appointment of a representative. **Complete Section A, C and E.**
- ☐ cancelling the appointment of a representative and appointing a new representative. **Complete Section A, B, C and E.**
- ☐ withdrawing role as a representative. **Complete Section A, D and E.**

SECTION A: APPLICANT INFORMATION

1. Your full name

Family name (Surname) (as shown on your passport or travel document)

Given name(s) (as shown on your passport or travel document)

2. Your date of birth (YYYY-MM-DD)

3. Your email address

If you do not have an email address, provide either your telephone number or your address

4. Application Information

Type of application (permanent residence, extension of study permit, etc.)

Application number (if known)

5. Unique Client Identifier (UCI) number (if known)

SECTION B: APPOINTMENT OF REPRESENTATIVE

- I authorize the following individual to serve as my representative, as the primary point of contact on my application, and to conduct business on my behalf with Immigration, Refugees and Citizenship Canada and Canada Border Services Agency. **Note:** Even if a representative is being paid or compensated by someone other than you (the applicant), the representative is still considered to be a paid representative.
- I authorize Immigration, Refugees and Citizenship Canada and Canada Border Services Agency to release information from my application and that of my dependent children under 18 years of age to my representative. This authorization is in accordance with the *Privacy Act*.
- I am aware that any information which would be subject to exemption, if I had the right of access under the *Privacy Act* or the *Access to Information Act*, will likely not be released.

6. Your representative's full name

Family name (Surname)

Given name(s)

7. Your representative (Select one option):**(i) is UNPAID and is a**

- ☐ Friend or family member
- ☐ Member in good standing of the College of Immigration and Citizenship Consultants (CICC)

Membership ID number

- ☐ Member in good standing of a Canadian Provincial or Territorial law society or student-at-law

Which Province/Territory?

Membership ID number (if applicable)

- ☐ Member in good standing of the Chambre des notaires du Québec

Membership ID number

- ☐ Other (please specify)

OR**(ii) is, or will be, PAID and is a member in good standing of**

- ☐ The College of Immigration and Citizenship Consultants (CICC)

Membership ID number

- ☐ A Canadian Provincial or Territorial law society or student-at-law

Which Province/Territory?

Membership ID number (if applicable)

- ☐ The Chambre des notaires du Québec

Membership ID number

8. Your representative's contact information

Name of firm or organization (if applicable)

If student-at-law, write the name of the supervising lawyer

Supervising lawyer membership ID

Mailing address

Apt/Unit

Street no.

Street name

City/Town

Province/State/Territory

Country or territory

Postal code/ZIP

Telephone number

Country Code

Area Code and Telephone number

Fax number (if applicable)

Country Code

Area Code and Telephone number

E-mail address (if applicable)

By indicating your representative's e-mail address, you are hereby authorizing Immigration, Refugees and Citizenship Canada to send your personal information to this specific email address.

9. Your representative's declaration:

- I declare that the information in Section B is truthful, complete and correct.
- I understand and accept that I am the person appointed by the applicant to conduct business on the applicant or sponsor's behalf with Immigration, Refugees and Citizenship Canada and Canada Border Services Agency.

 Signature of representative

 Date (YYYY-MM-DD)

 (if applicable) Signature of supervising lawyer

 Date (YYYY-MM-DD)
SECTION C: CANCEL THE APPOINTMENT OF A REPRESENTATIVE

I, the applicant, withdraw my authorization for this person to serve as my representative, to receive information on my application and to conduct business on my behalf with Immigration, Refugees and Citizenship Canada and Canada Border Services Agency.

10. Representative's full name

Family name (Surname)

Given name(s)

Name of firm or organization (if applicable)

The applicant's email provided in section A will be used for further communication from Immigration, Refugees and Citizenship Canada and Canada Border Services Agency.

SECTION D: WITHDRAWING ROLE AS A REPRESENTATIVE

I, the representative, withdraw myself as the applicant's representative.

11. Representative's full name

Family name (Surname)

Given name(s)

Name of firm or organization (if applicable)

The applicant's email provided in section A will be used for further communication from Immigration, Refugees and Citizenship Canada and Canada Border Services Agency.

(if applicable) I have been unsuccessful in obtaining the applicant's agreement and/or signature on this form (Section E), and attest to having taken reasonable steps to do so.

 Signature of representative

 Date (YYYY-MM-DD)

SECTION E: YOUR DECLARATION**12. Your declaration**

- I declare that I have fully and truthfully answered all questions on this form and any attached application (if applicable).
- I also declare that I have read and understood all the statements on this form, having asked and obtained an explanation for every point that was not clear to me.

 Signature of applicant or Parent/Legal Guardian for a person under 18 years of age

 Date (YYYY-MM-DD)

 If a sponsorship application: Signature of spouse or common-law partner

 Date (YYYY-MM-DD)

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

Personal information provided on this form is collected by Immigration, Refugees and Citizenship Canada (IRCC) under the authority of the *Immigration and Refugee Protection Act* (IRPA) and of the Citizenship Act. The personal information of the applicant is used for identification and authorization purposes. The personal information of the immigration representative is used to verify that the representative is authorized to offer representation services according to the provisions of IRPA and of the Citizenship Act.

The personal information of both the applicant and the representative may be disclosed to other federal government institutions, non-governmental and inter-governmental organizations, regulatory bodies, investigative bodies, and provincial/territorial governments for the purposes of validating identity, information, and supporting an investigation.

Personal information of both the applicant and the representative may be used for other purposes including research, statistics, program and policy evaluation, internal audit, compliance, risk management, strategy development and reporting.

Failure to complete the form in full will result in a delay to processing. The *Privacy Act* gives individuals the right of access to, protection, and correction of their personal information. 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 013, 042, 054, 068.