

## CUSTODIANSHIP DECLARATION CUSTODIAN FOR MINORS STUDYING IN CANADA

STUDENT INFORMATION									
Family name	Given nar	ne(s)		Citizenship		Date of birth Y	M	Gender D F Fer	nale
Name and address of school in 0	Canada			2		1 1 1	.   1	M Ma	ile other gender
Address where student will resid	e in Canada		-			-			
PARENTS/GUARDIANS INF	ORMATION (Pre	erably from bo	th parents/	guardians)					
			Parent/Guardian 1			Parent/Guardian 2			
Full name	Family name		Given name	e(s)	Family n	ame		Given name(s)	
Date of birth		Υ	М	D		1 .	Y	M D	
Home address Telephone number				1021 - 1000					
CUSTODIAN INFORMATION	1				•				5 1
amily name		Given name(s)				Status in Canada  Canadian citizen or  Permanent resident  Date of birth  Y  M			M D
Home address								Telephone no.	
The application of the official se age, and currently resides at the	al below confirms the home address state	at the notary public ed above.	has received	l evidence that the o	custodian is a	Canadian citize	en or a perma	anent resident, is over	19 years of
Ι,				(name of custodian)	), hereby solen	nnly declare the	at I will under	rtake the full custodian	ship for the
said student,	nt, I certify that I res	/e made the neceside within a reaso	ssary arrange nable distanc	ments for the care	and support of	f the said stud	ent in place	le under the age of ma of the parents as app able to fulfil my oblig	ropriate. By
	Signature of custo	dian		Year	Month Date	Day			
			,			- 4 - 4			
Sworn before me at:day of					(provinc	e/territory),		country (if	applicable).
	Signature of nota	ary				OFFICIAL SE	EAL OF NOT	ARY PUBLIC	



## CUSTODIANSHIP DECLARATION PARENTS/GUARDIANS FOR MINORS STUDYING IN CANADA

STUDENT INFORMATION								
Family name	Given name(s)	Citizenship	Date of birth	Gender				
			Y	D F Female				
Name and address of school in Ca	nada							
	110000			M Male				
				X Another gender				
Address where student will reside it	n Canada							
PARENTS/GUARDIANS INFO	RMATION (Preferably from bo	th parents/guardians)						
	Parent/Guardian 1		Paren	Parent/Guardian 2				
Full name	Family name	Given name(s)	Family name	Given name(s)				
Date of birth	Υ Υ	M D	Y	M D				
Date of birdi								
Home address								
Telephone number								
CUSTODIAN INFORMATION								
Family name	Given name(s)		Status in Canada  Canadian citizen or	Date of birth Y M D				
			Permanent resident	( )				
Current residential address				Telephone no.				
May/Our abild will accide.	345 45	War and and day of						
_		the school dormitory, or						
□ w	rith another person:		(please pro	ovide name and indicate relationship).				
I/We,	a	and	(na	ames of parents/guardians),				
the parents/guardians of the said student, (name of student), hereby grant full custodianship to								
<u> </u>		(name of custodian), during t	the student's stay in Canada, while they	are under the age of majority in the				
province in which they reside. I ha	ave made the necessary arrangemen	its for the care and support of	the said student such that the custodian nted custodian resides within a reasonab	should act in the place of me/us, the				
residence and school and will be a	able to fulfil their obligations as a cust	todian in the event of an emerg	gency.	e distance of my/our child's intended				
	Year	Month Day		Year Month Day				
Signature of parent/gua	rdian (1) Da	ate	Signature of parent/guardian (2)	_ L I I Date				
Sworn before me at:	(city), in the		(province/territory),	country (if applicable).				
			(p. 2 root to the 1) /					
This day of	(month),	(year). 						
-								
	Signature of notary		OFFICIAL SEAL OF N	OTARY PUBLIC				

