



**Tips for completing IMM5710
Co-op Work Permit Application
ONLINE APPLICATION**

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

This is the Client ID number from your study permit

This box will say "yes" after you validate

1 UCI 12345678	2 I want service in English	OFFICE USE ONLY Validated Yes
3 I am applying for one or more of the following:		
<input type="checkbox"/> A work permit with the same employer <input type="checkbox"/> Restoration of temporary resident status as a worker <input checked="" type="checkbox"/> A work permit with a new employer <input type="checkbox"/> Initial temporary resident permit or extension of temporary resident permit		

PERSONAL DETAILS

1 Full name		Family name (as shown on your passport or travel document) Smith		Given name(s) (as shown on your passport or travel document) John	
2 Have you ever used any other name (e.g. Nickname, maiden name, alias, etc.)?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Family name: _____ Given name(s): _____					
3 Sex Male	4 Date of birth 1994 01 01 YYYY MM DD	5 Place of birth City/Town Paris		Country France	
6 Citizenship France					
7 Current country of residence:					
Country	Status	Other	From	To	
Canada	Student		2012-09-01 YYYY-MM-DD	2016-12-31 YYYY-MM-DD	
8 Previous countries of residence: 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 Country Status Other From To _____					
9 a) Your current marital status Single		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		Date YYYY-MM-DD	
c) Provide the name of your current Spouse/Common-law partner					
Family name		Given name(s)			
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					

Study permit expiry date

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

Applicant Name Smith, J.	Date of Birth 1994-01-01
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PERSONAL DETAILS (CONTINUED)

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

LANGUAGE(S)

1 a) Native language French	b) If your native language is not English or French, which language do you use most frequently?
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PASSPORT

1 Passport number AA12345678	2 Country of issue France	3 Issue date 2012-01-01 YYYY-MM-DD	4 Expiry date 2016-12-31 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 Current mailing address						
P.O. box	Apt/Unit	Street no. 1234	Street name Jane Street	This is the address where your permit will be mailed		
City/Town Victoria	Country Canada	Province BC	Postal code V9A 5S1			
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	Province	Postal code			
3 Telephone no. <input checked="" type="checkbox"/> Canada/US <input type="checkbox"/> Other				4 Alternate Telephone no. <input checked="" type="checkbox"/> Canada/US <input type="checkbox"/> Other		
Type Cellular	Country Code 1	No. (250) 555	Ext. 1234	Type Cellular	Country Code 1	No. (250) 555 - 5678
5 Fax no. <input type="checkbox"/> Canada/US <input type="checkbox"/> Other				6 E-mail address john@uvic.ca		

COMING INTO CANADA

1 Date and place of your <u>original</u> entry to Canada	Date 2012-09-01 YYYY-MM-DD	Place Vancouver, BC
2 a) The original purpose for coming to Canada Study	b) Other	The dates and locations should match the stamps in your passport
3 Date and place of your <u>most recent</u> entry to Canada (if not the same as original entry)	Date 2013-01-02 YYYY-MM-DD	Place Vancouver, BC
4 If applicable, provide the document number of the most recent Visitor Record, Study Permit or Work Permit issued to you.	Document Number F123456789	

Provide the document number from your most recent study or work permit

PROTECTED WHEN COMPLETED - PROTÉGÉ UNE FOIS REMPLI - B
CANADA IMMIGRATION
CC123 456 789

F123456789

Applicant Name Smith, J.	Date of Birth 1994-01-01
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DETAILS OF INTENDED WORK IN CANADA

1 a) What type of work permit are you applying for? Co-op Work Permit	b) Other
c) Provide your Eligibility Verification Number (EVN) if you have one. You must have an EVN to apply for an Off-Campus Work Permit	
EVN-OCWP ▶ ##### - #####	
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) University of Victoria	
b) Complete Address of Employer (Canadian or Foreign): P.O. BOX 1700 STN CSC, Victoria, BC Canada V8W 2Y2	
3 Intended location of employment in Canada?	
Province BC	City/Town Victoria B.C.
Address P.O. Box 1700 STN CSC	
4 My occupation in Canada will be:	
Job title Co-op student	Brief description of duties Co-op student
5 Duration of expected employment ▶	6 Labour market opinion (LMO) No.
From 2013-09-01 YYYY-MM-DD	To 2017-05-31 YYYY-MM-DD
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	

Work term start date



Estimated graduation date



EDUCATION

Have you had any post secondary education (including university, college or apprenticeship training)? No Yes

If you answered "yes", give full details of your highest level of post secondary education.

1	From 2012 09 YYYY MM	Field and level of study B.SEng	School/Facility name University of Victoria	
	To 2017 05 YYYY MM	City/Town Victoria	Country Canada	Province/State BC

Estimated graduation dates should be the same



EMPLOYMENT

Give details of your employment for the past 10 years (such as civil servant, judge, police officer, mayor, member of parliament, hospital administrator)

1	From 2012 09 YYYY MM	Current Activity/Occupation Student	Company/Employer/Facility name University of Victoria	
	To 2017 05 YYYY MM	City/Town Victoria	Country Canada	Province/State BC
2	From 2010 01 YYYY MM	Previous Activity/Occupation Retail Sales Clerk, Gift Shop	Company/Employer/Facility name Louvre Museum	
	To 2011 01 YYYY MM	City/Town Paris	Country France	Province/State
3	From YYYY MM	Previous Activity/Occupation	Company/Employer/Facility name	
	To YYYY MM	City/Town	Country	Province/State

Applicant Name

Smith, J.

Date of Birth

1994-01-01

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

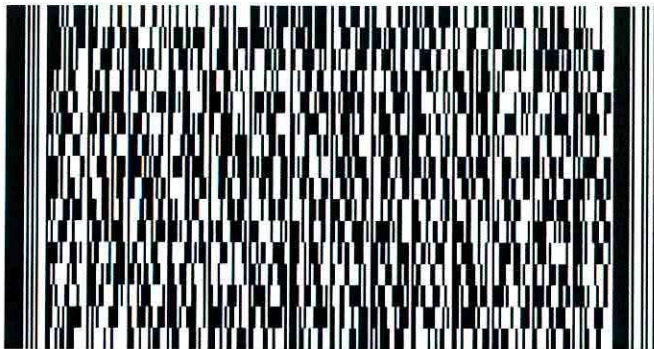
1	<p>a) Within the past two years, have you or a family member ever had tuberculosis of the lungs or been in close contact with a person with tuberculosis? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>b) Do you have any physical or mental disorder that would require social and/or health services, other than medication, during a stay in Canada? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</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>
2	<p>a) Have you ever remained beyond the validity of your status, attended school without authorization or worked without authorization in Canada? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>b) Have you ever been refused any kind of visa, admission, or been ordered to leave Canada or any other country? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>c) If you answered "yes" to question 2a) or 2b), please provide details.</p>
3	<p>a) Have you ever committed, been arrested for or been charged with or convicted of any criminal offence in any country? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>b) If you answered "yes" to question 3a), please provide details.</p>
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)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>b) If you answered "yes" to question 4a), please provide dates of service and countries where you served.</p>
5	<p>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</p>
6	<p>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</p>

Validate and save to your desktop

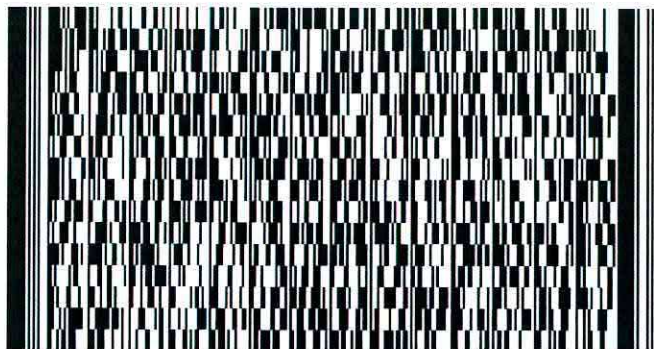
Applicant Name
Smith, J.

Date of Birth
1994-01-01

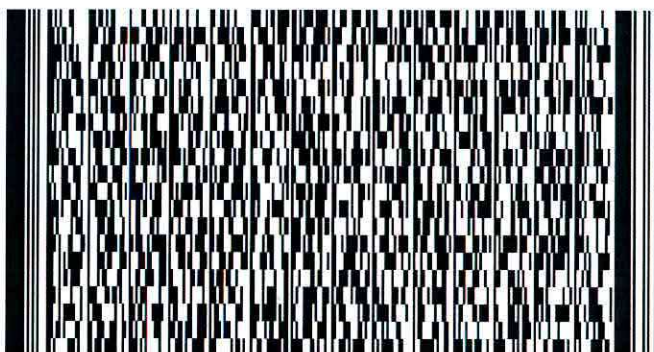
APPLICATION TO CHANGE CONDITIONS, EXTEND MY STAY OR REMAIN IN CANADA AS A WORKER



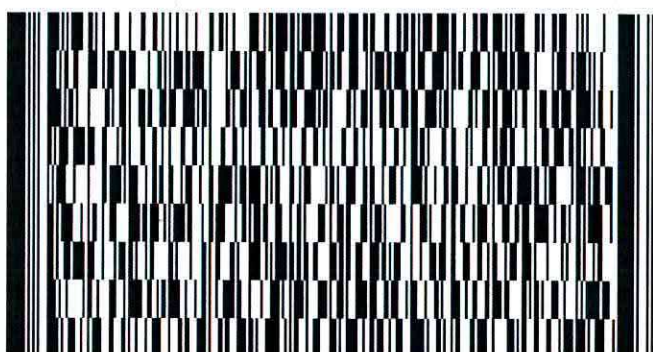
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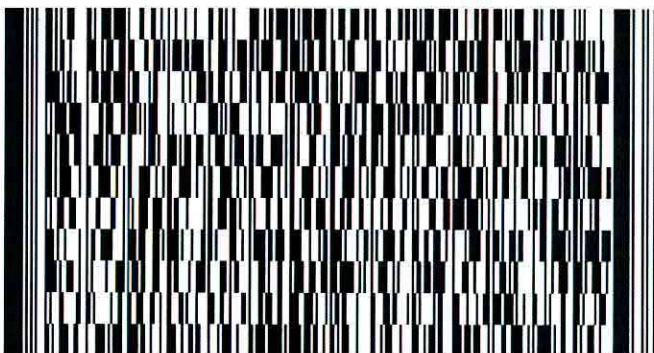
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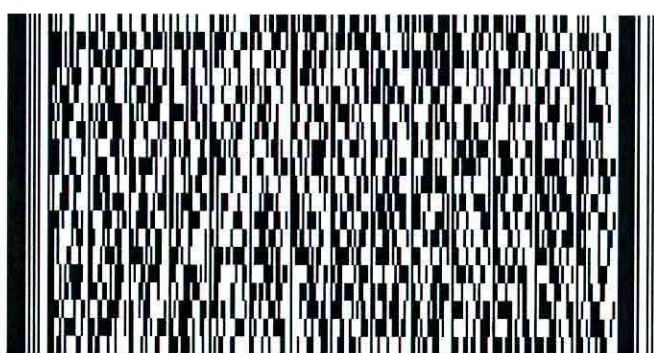
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IMM5710_12-2012_4



IMM5710_12-2012_5



IMM5710_12-2012_6

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.

If you are applying online, you do not need to sign your application form by hand. You will be asked to provide an electronic signature once you are ready to transmit your documents to CIC.

Signature of Applicant or Parent/Legal Guardian's for a person under 18 years of age.

Date: YYYY-MM-DD



IMPORTANT NOTE: This application must be signed and dated before it is submitted.

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.

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.