



UNDERTAKING / APPLICATION FOR A JOINT ASSISTANCE SPONSORSHIP

SPONSORSHIP AGREEMENT HOLDERS AND CONSTITUENT GROUPS

FOR CIC USE ONLY	
CIC file identification no.	Visa office file identification no.
	B
Name of Principal Refugee Applicant (PA)	

A SPONSORSHIP AGREEMENT HOLDER (completion of this section is mandatory)

Name of Sponsorship Agreement Holder (SAH)			FOR CIC USE ONLY	
SAH representative - Surname (Family name)	Given name(s)	Date of birth Y M D	Client identification no.	
Other name(s) used (include birth name, maiden, previous married name(s), aliases and nicknames)				
Address (no. and street)				Apt. / Unit
City		Province		Postal code
Home telephone no. Area code No.	Business or cell telephone no. Area code No.	Ext.	Fax no. Area code No.	E-mail address (specify, if available)

B CONSTITUENT GROUP (if applicable)

Name of Constituent Group (CG)			FOR CIC USE ONLY	
CG representative(s) - Surname (Family name)	Given name(s)	Date of birth Y M D	Client ID no.	
Other name(s) used (include birth name, maiden, previous married name(s), aliases and nicknames)				
Address (no. and street)				Apt. / Unit
City		Province		Postal code
Home telephone no. Area code No.	Business or cell telephone no. Area code No.	Ext.	Fax no. Area code No.	E-mail address (specify, if available)

C REFUGEE APPLICANTS

Note: include both Accompanying and Non-Accompanying family members or dependants.

1 Principal Refugee Applicant Last name (surname/family name)		Given name(s)		FOR CIC USE ONLY	
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Place of birth	Country of birth	Principal Applicant ID no.	
Country of citizenship			Marital status		
2 Refugee Applicant Last name (surname/family name)		Given name(s)		FOR CIC USE ONLY	
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Place of birth	Country of birth	Principal Applicant ID no.	
Country of citizenship		Marital status	Relationship	<input type="checkbox"/> accompanying <input type="checkbox"/> non-accompanying	
3 Refugee Applicant Last name (surname/family name)		Given name(s)		FOR CIC USE ONLY	
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Place of birth	Country of birth	Principal Applicant ID no.	
Country of citizenship		Marital status	Relationship	<input type="checkbox"/> accompanying <input type="checkbox"/> non-accompanying	
4 Refugee Applicant Last name (surname/family name)		Given name(s)		FOR CIC USE ONLY	
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Place of birth	Country of birth	Principal Applicant ID no.	
Country of citizenship		Marital status	Relationship	<input type="checkbox"/> accompanying <input type="checkbox"/> non-accompanying	

C REFUGEE APPLICANTS (continued)

5 Refugee Applicant Last name (surname/family name)		Given name(s)			FOR CIC USE ONLY
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Place of birth	Country of birth		Principal Applicant ID no.
Country of citizenship		Marital status	Relationship	<input type="checkbox"/> accompanying <input type="checkbox"/> non-accompanying	
6 Refugee Applicant Last name (surname/family name)		Given name(s)			FOR CIC USE ONLY
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Place of birth	Country of birth		Principal Applicant ID no.
Country of citizenship		Marital status	Relationship	<input type="checkbox"/> accompanying <input type="checkbox"/> non-accompanying	
7 Refugee Applicant Last name (surname/family name)		Given name(s)			FOR CIC USE ONLY
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Place of birth	Country of birth		Principal Applicant ID no.
Country of citizenship		Marital status	Relationship	<input type="checkbox"/> accompanying <input type="checkbox"/> non-accompanying	
8 Refugee Applicant Last name (surname/family name)		Given name(s)			FOR CIC USE ONLY
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Place of birth	Country of birth		Principal Applicant ID no.
Country of citizenship		Marital status	Relationship	<input type="checkbox"/> accompanying <input type="checkbox"/> non-accompanying	

D IDENTIFICATION OF SPECIAL NEEDS

Identify how the sponsoring group and services available in the community can assist with special needs listed on the refugee profile.

JAS cases are a shared responsibility. They work best when partners understand the role of one another. Listed below are obligations of the sponsor, Citizenship and Immigration (CIC) and the role of the RAP (Resettlement Assistance Program) service providing organization.

E OBLIGATIONS

The sponsor agrees to provide the following assistance to the refugee(s) named on this application until they become continuously self-supporting. The obligations under this agreement are for a period up to 24 months from the date the refugee(s) arrive in Canada.

1. Teach rights and responsibilities of permanent residence in Canada;
2. Show where and how to arrange for services and accompanying them to different services;
3. Ensure that special needs are met through appropriate referral and support services;
4. Provide general companionship and settlement counselling as required;
5. Provide assistance in finding employment;
6. Help the refugee(s) learn one of Canada's official languages;
7. Act as an advocate to help the refugee(s) obtain the assistance required for integration into Canadian society.

Do you agree to provide this support? Yes No

Citizenship and Immigration Canada agrees to provide the following assistance to refugee(s) named on this application for a period up to 24 months from the date the refugee(s) arrive in Canada or until they become continuously self-supporting, whichever comes first.

1. Financial assistance equivalent to provincial social assistance rates to meet basic food, shelter and clothing needs;
2. Start-up costs including: one time payments for clothing, household effects, linens, staple food, furniture;
3. Access to emergency medical services - Interim Federal Health;
4. Access to assistance loans for the deposits for rent, utilities and telephone;
5. Access to transportation loans;
6. Access to service provider organizations for assistance with language training and other settlement assistance.

Resettlement Assistance Program (RAP) service providers are funded through CIC to provide the following services:

1. Temporary accommodation for the refugee(s);
2. Up to 18 hours of service may be provided. All services should be provided in consultation with the sponsoring group;
3. Within the 18 hours of service such tasks are provided: airport reception, finding permanent accommodation, financial and basic orientation, assistance in applying for health card(s) and social insurance number(s), links to mandatory broader based programs and services and special needs counselling.

F DECLARATION BY THE SPONSOR

1. My group is not in default in respect of any other sponsorship undertaking(s).
2. My group understands its obligations under the Joint Assistance Sponsorship Program, and will make arrangements in the expected community of settlement for the reception and settlement of the persons identified in this undertaking.
3. To the best of my ability, I will not knowingly or deliberately allow any individual to participate in the group's settlement activities who may be considered a threat to the safety and security of the refugee(s).

Name of sponsoring group representative	Signature of group representative	Date
		Y M D

FOR CIC USE ONLY**G RELATIVES OF REFUGEE(S) LIVING IN CANADA**

From information provided by the visa office, identify if the refugee(s) have relatives in Canada who may be willing to assist the sponsoring group in resettling the refugee(s)

- The refugee(s) has relatives living in Canada but they are not willing to assist in the resettlement of the refugee(s)
- The refugee(s) did not identify that they have any relatives living in Canada
- The refugee(s) identified that relatives accompanying them to Canada may be able to assist them in their resettlement
- The refugee(s) identified that they have relatives in Canada who are able to assist in their resettlement.
- Provide address information below, when available

Name of refugee's relative(s) living in Canada - if more than one include a separate page with contact information listed

Surname (Family name)		Given name(s)	
<input type="checkbox"/> Canadian citizen	<input type="checkbox"/> Permanent resident	<input type="checkbox"/> Other	Relationship to refugee(s)
Address (no. & street)			Apt. / Unit
City		Province	Postal code
Home telephone no. Area code No.	Business or cell telephone no. Area code No.	Fax no. Area code No.	E-mail address (specify, if available)

H SPECIAL NEEDS

Indicate if this sponsorship falls within one of the following categories

- Medical disabilities Separated children
- Women at risk (AWR) Urgent protection
- Elderly refugees Other (specify) _____
- Large family/Socio-economic difficulties

Signature of officer	Date	CIC office
	Y M D	
CIC contact name and number	Visa office	Approximate date for completion of processing
		Y M D

The information you provided on this form is collected under the authority of the **Immigration and Refugee Protection Act** and will be used to maintain a record of application and sponsorship undertakings by Sponsorship Agreement Holders and Constituent Groups in Canada according to the requirements of the Act. It will be retained in the Personal Information Bank CIC PPU 008 identified in **Infosource**. It may be shared with other organizations in accordance with the consistent use of information under the *Privacy Act*. 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 and through the Citizenship and Immigration Call Centre. **Infosource is also available at Public Libraries in Canada.**