PROTECTED WHEN COMPLETED - B

PAGE 1 OF 3

SUPPLEMENTARY INFORMATION HUMANITARIAN AND COMPASSIONATE CONSIDERATIONS

This form must be completed by:

- · you, the principal applicant;
- your family members ONLY IF they have different humanitarian and compassionate grounds AND they are included in this application.

Client ID no.	
Client file no.	

WARNING:

You must provide truthful and accurate information. The information provided may be verified. Enforcement action may be initiated if you give false or misleading information.

IMPORTANT:

Ensure you include **any and all** factors you wish to have considered by Citizenship and Immigration Canada during the processing of your application for permanent residence. You must also provide evidence to support any statements you make on this form. Additional information or documentation **not** submitted with your application **may not be considered at a later date**.

Citizenship and Immigration may not request additional information from you. It is your responsibility to list all factors you wish to have considered at the time you submit your application.

While you may be required to attend an interview, note that there is no right to an interview.

- This form is part of your Application for Permanent Residence from Within Canada.
- Canadian immigration law requires applicants to obtain a permanent resident visa at a visa office outside of Canada and to be admissible to Canada. In your application, you must clearly indicate the special circumstances that would exempt you from these, or other, requirements.
- · Print all names in full do not use initials.
- · It is your responsibility to keep Citizenship and Immigration Canada informed of any change of circumstances.

NOTE: The information you provide should not be limited by the space allowed to answer a question. If you need more space, attach another sheet of paper. Indicate the number of the question you are answering.

1.	Personal inform	ation
	Family name	
	Given name(s)	
	Date of birth	Day Month Year
	Citizenship	
2.	Sponsor Do you have a sp	consor? (See Appendix C for a definition)
	No Y	'es If yes, your sponsor must read and follow the instructions in Appendix C .
	Family name	
	Given name(s)	
	Relationship	
3.	With whom wer	e you living before coming to Canada?
	Family name	
	Given name(s)	
	Sex	Male Female
	Relationship to you	
	Country of birth	
	Date of birth	Day Month Year
	Address	Street and no.
		City or town Province/State/District
		Country

Family name		
Given name(s)		
Sex	Male Femal	e
Relationship to you		
Country of birth		
Date of birth	Day Month Year	
Address	Street and no.	Province
	City or town	
Į		
ĺ		
Family name		
Given name(s)		
Sex	Male Femal	e
Relationship to you		
Country of birth		
Date of birth	Day Month Year	
Address	Street and no.	Province
•	City or town	



NOTE: The information you provide should not be limited by the space allowed to answer a question. If you need more space, attach another sheet of paper. Indicate the number of the question you are answering.

4.		immediate family (parents, child n Canada (continued)	dren, brothers and	Details of your i sisters) living al	mmediate family (parents, c broad	children, brothers and
	Family name			Family name		
	Given name(s)			Given name(s)		
	Sex	Male Female		Sex	Male Female	
	Relationship	Ividie Terridie		Relationship	Wate Terriale	
	to you			to you		
	Country of birth	Day Month Year		Country of birth	Day Month Year	
	Date of birth			Date of birth		
	Address	Street and no.	Province	Address	Street and no.	
		City or town			City or town	Province/State/District
					Country	
_	Davage way are	living with in Canada		Family name		
5.		living with in Canada th someone in Canada?		Given name(s)		
	No No	res If yes, provide details be	elow.		Male Female	
	Family			Sex Relationship	Iviale Female	
	Family name			to you		
	Given name(s)			Country of birth	Day Month Year	
	Sex Relationship	Male Female		Date of birth		
	to you			Address	Street and no.	
	Country of birth				City or town	Province/State/District
	Date of birth	Day Month Year			Country	
	Address	Street and no.	Province	Family name		
		City or town	Postal code	-		
				Given name(s)		
				Sex Relationship	Male Female	
				to you		
				Country of birth	Day Month Year	
				Date of birth	Day Month Fear	
				Address	Street and no.	
					City or town	Province/State/District
					Country	
		Vall must	provide evidence to support any	statement you make	on this form	
	Ado		ntation NOT submitted with your			ATER DATE.
7.	Explain the hun	nanitarian and compassionate ı	easons that prevent you from lea	iving Canada.		_
8.		esting an exemption because your of the string and exemption because you is a string and exemption and exemption are string as the string are stri	ou or a family member are inadmi	ssible, or do not med	et any applicable criteria or	obligation of the
	 clearly indi 	cate in your application the spe	ecific exemption(s) you are reque			
	 provide all grounds. 	details related to this request,	including the reasons why you sh	ould be granted an e	exemption on humanitarian	and compassionate

	indicate the number of the question you are answering.
9.	If applicable, describe the circumstances of your family and other relationships that would support your humanitarian and compassionate application.
10	If applicable, considering the best interest of the child, provide information on any child affected by this decision.
10.	in applicable, considering the best interest of the clinic, provide information on any clinic affected by this decision.
11.	How have you established yourself in Canada?
12.	How do you support yourself financially in Canada?
13.	Indicate any other information you want to have considered in your application.
	It is your responsibility to prove all statements made in this application.
	Provide any additional documentary evidence you wish to be considered.
	CLARATION OF APPLICANT
rue	clare that the information I have given on this supplementary information form is truthful and correct. Day Month Year
C	Signature of APPLICANT Date
	WARNING: It is an offence under Section 127 of the Immigration and Refugee Protection Act to knowingly make a false statement on this form.
	The information you provide on this form is collected under the authority of the Immigration and Refugee Protection Act and will be used in assessing

Humanitarian and Compassionate cases according to the requirements of the Act. It will be retained in Personal Information Bank CIC PPU 042. 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 in Canadian public libraries.

NOTE: The information you provide should not be limited by the space allowed to answer a question. If you need more space, attach another sheet of paper.

IMM 5283 (12-2006) E