

PERMANENT RESIDENT TRAVEL DOCUMENT

## IMMIGROUP ORDER FORM

INSTRUCTIONS

Read all instructions and follow carefully

1. Please complete the application form included herein, and make a copy of the information page of your passport. Complete this order form and make sure to include your telephone number or e-mail address where we can contact you.
2. Your letter must include the following information: where you are, how long you have been out of Canada, what you are doing outside of Canada, and who is accompanying you on this trip.
3. Fax us the documents listed in the document checklist to:  
**1-416-640-2650** or scan and e-mail your documents to [info@immigroup.com](mailto:info@immigroup.com). We will respond within 24 hours
4. We will call you or respond via e-mail to confirm the receipt of your fax or e-mail. We will analyze your case and ask for further documents to verify that you meet the residency requirement. These documents vary on a case by case basis.

DOCUMENT CHECKLIST

- ☐ APPLICATION FORM IMM5524  
(duly completed and signed)
- ☐ COPY OF THE IDENTITY PAGE IN YOUR PASSPORT
- ☐ IMMIGROUP ORDER FORM
- ☐ LETTER EXPLAINING YOUR SITUATION
- If available:
- ☐ COPY OF PR CARD

**APPLICATIONS MISSING THIS ORDER FORM WILL NOT BE PROCESSED.**

SERVICE OPTIONS

<b>REGULAR SERVICE</b>  <b>\$282.50</b> <input type="checkbox"/> \$250 Immigroup Service Fee \$32.50 HST	<b>STATUS IN JEOPARDY</b> If you are close to or over 1095 days outside of Canada within the last five years <input type="checkbox"/> <b>\$621.50</b> \$550 Immigroup Service Fee \$71.50 HST
<b>*GOVERNMENT FEE OF \$50 MUST BE PAID IN PERSON AT CONSULATE*</b>	

Name Address Primary Phone Other Phone E-mail (please write legibly) CREDIT CARD INFORMATION

Cardholder Name	<input type="text"/>
Card Number	<input type="text"/>
Expiry Date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
CWV	<input type="text"/>
Cardholder Signature	<input type="text"/>

DISCLAIMER*Applicant must sign below*

\*By signing below I assert that I have read and agreed to the terms and conditions as listed on <http://www.immigroup.com/disclaimer.php> and agree to the following conditions:

\*Immigroup Inc is not responsible for documents or passports lost by courier companies or any government office.

\*Immigroup Inc is not responsible for applications that are rejected.

\*All fees are non-refundable once applications are submitted to the government.

\*I agree to being charged the total fees corresponding with my required service

SIGN HERE:



## APPLICATION FOR A TRAVEL DOCUMENT (PERMANENT RESIDENT ABROAD)

All individuals, regardless of age, must complete their own application form. Parents or legal guardians must complete and sign application forms for children under the age of 14.

Use an extra sheet of paper if you need more space to answer a question. Print your name at the top of the sheet and indicate the question number.

I want service in: ☐ English ☐ French

Space reserved for  
applicant's photo

Date of receipt stamp at post

### PART I - PERSONAL INFORMATION

1. **Your full name** (as it appears on your Record of Landing (IMM 1000) or Confirmation of Permanent Residence (IMM 5292) or Permanent Resident Card)

Family name

Given name(s)

Other names  
(for example,  
maiden name,  
son/daughter of,  
other family name,  
other given name)

2. **Your sex** ☐ Female ☐ Male

3. **Your date of birth**  Year  Month  Day

4. **Your place of birth**  
Town/City   
State/province   
Country

5. **Country of citizenship**

6. **Passport number**

Expiry date  Year  Month  Day

7. **Your marital status (choose one)**  
☐ Single ☐ Widowed ☐ Engaged ☐ Separated  
☐ Married ☐ Divorced ☐ Common-law partner

8. **Date and place you became a permanent resident of Canada**  
Date  Year  Month  Day  
City   
Province

9. **The number on your Record of Landing, Confirmation of Permanent Residence or Permanent Resident Card**

10. **When were you last physically present in Canada?**

Date  Year  Month  Day

11. **When do you intend to return to Canada?**

Date  Year  Month  Day

### 12a. Your permanent address in Canada

Street and no.   
City  Province   
Country  Postal code   
Telephone number  Area code  Number

### 12b. Your current address outside of Canada

### 12c. Your mailing address outside Canada (if different from above)

If we need to reach you while we process your application:

Your telephone number  Country code  Area code  Number

Your e-mail address (if available)

### 13. Answer Yes or No:

	Yes	No
a. Were there any terms and conditions applied to you at the time you were granted permanent residence or landed in Canada?	<input type="checkbox"/>	<input type="checkbox"/>
b. Have you ever lost your status as a permanent resident of Canada?	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you ever submitted an appeal to the Immigration Appeal Division of the Immigration and Refugee Board against a decision on the residency obligation?	<input type="checkbox"/>	<input type="checkbox"/>
d. Have you ever been issued a Returning Resident Permit or a Travel Document?	<input type="checkbox"/>	<input type="checkbox"/>

If you answered "YES" to any of the questions above, provide details below. Use an extra sheet of paper if you need more space.

**14. Your activities and employment**

Give details of what you have been doing during the past five years. Include jobs held, periods of unemployment, time spent studying, etc. **If you became a permanent resident less than five years ago:** list your activities and employment from the time you became a permanent resident to present.

From Y M	To Y M	Activity/Employment	Name of company, school, etc.	City/Town, Province/State, Country

**PART II - RESIDENCY OBLIGATION**

Refer to the guide for more information on meeting the residency obligation and on acceptable supporting documents.

**15. Time spent in Canada**

When were you physically present in Canada? List all periods you spent in Canada during the past five years. **If you became a permanent resident less than five years ago:** list time spent in Canada from the time you became a permanent resident to present.

From Y M	To Y M	Address	City/Town, Province	Total number of days
TOTAL				

If the total number of days is **equal to or greater than 730 days**, skip to the **Declaration**.

If the total number of days is **less than 730 days**, answer the following questions.

**16. Absence while accompanying a Canadian citizen or a permanent resident outside Canada**

Have you accompanied a Canadian citizen or permanent resident while outside Canada?

☐ No

☐ Yes

▶ Name of person you accompanied

Family name

Given name(s)

Relationship to you ▶ ☐ Spouse ☐ Common-law partner ☐ Parent

(Provide proof of the person's relationship to you)

He or she is a ▶ ☐ Canadian citizen. (Provide proof of his or her Canadian citizenship)

▶ ☐ Permanent resident of Canada who is employed outside of Canada on a full-time basis by a Canadian business, or by the federal or provincial public service in Canada.  
(Provide proof of the person's status in Canada and proof of employment)

List the periods when you were outside of Canada and accompanying the person above during the past five years.

**If you became a permanent resident less than five years ago:** list the periods from the time you became a permanent resident to present.

From Y M	To Y M	Address	City/Town, Country	Total number of days
TOTAL				

### 17. Absences while employed by a Canadian business

Have you been employed outside of Canada on a full-time basis by a Canadian business or by the public service of Canada or of a province of Canada?

☐ No ☐ Yes ► (provide proof of this employment)

List the periods when you have been outside of Canada and employed on a full-time basis by a Canadian business or by the public service of Canada or of a province of Canada during the past five years. **If you became a permanent resident less than five years ago:** list the periods from the time you became a permanent resident to present.

From Y M		To Y M		Address	City/Town, Province	Total number of days
<b>TOTAL</b>						

### Calculation

**Total number of days from question 15**

**Total number of days from question 16**

**Total number of days from question 17**

**GRAND TOTAL**

If your grand total is **equal to or greater than 730 days**, skip to the **Declaration**.

If your grand total is **less than 730 days** and you have been a permanent resident for five years or more, answer question 18.

**Note:** If your grand total is **less than 730 days** and you have been a permanent resident for **less than five years**, you may wish to answer question 18. The visa office will consider your answer to this question if it is apparent that you will not meet the residency obligation.

## 18. Humanitarian and Compassionate Grounds

If the visa office determines that you do not meet the residency obligation, are there humanitarian and compassionate considerations that would justify the retention of your permanent resident status? If applicable, also include humanitarian and compassionate considerations relating to the best interests of a child who may be directly affected by this residency determination. Use an extra sheet of paper if you need more space.

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## Declaration

- I certify that the information given on this form and in any documents attached is correct, complete and accurate.
- If this form pertains to a child under the age of 14, I certify that I am one of the child's parents or guardians.
- I understand the foregoing statements, having asked for and obtained an explanation on every point that was not clear to me.
- I further understand that the information provided by me may be verified and hereby consent to such verification activities.
- I also understand that it is a serious offence to provide false or misleading information and that the provision of false or misleading information may result in loss of my permanent resident status and may be grounds for my prosecution or removal from Canada.

Signature

\_\_\_\_\_

Date \_\_\_\_\_

Year	Month	Day
<div></div> <div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>

Signature of  
parent or guardian  
(if applicant is under  
the age of 14)

\_\_\_\_\_

Date \_\_\_\_\_

Year	Month	Day
<div></div> <div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>

The information you provide on this form is collected under the authority of the *Immigration and Refugee Protection Act* and will be used in determining whether you meet the terms and conditions of your permanent residency according to the requirements of the Act. It will be retained in a Personal Information Bank CIC PPU 068 *Determination of Permanent Resident Status* 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](http://infosource.gc.ca) and through the Citizenship and Immigration Call Centre. **Infosource is also available in Canadian public libraries.**