

REFUGEE TRAVEL DOCUMENT OR CERTIFICATE OF IDENTITY

IMMIGROUP ORDER FORM

INSTRUCTIONS

Read all instructions and follow carefully

1. Please complete the order form and application forms included herein. Make sure to include your telephone number and email address where you can be contacted.
2. Fax or scan and email all forms and documents in the document checklist to our office for review at **416-640-2650** or info@immigroup.com.
3. You will be contacted within 1 - 2 business days regarding your application. **If you have not been contacted after 2 business days, please contact our office at 1-866-760-2623 to confirm we have received your order.**
4. After we have reviewed your forms and documents, we will advise you to send the original forms and copies of documents to our office at:
1180 Danforth Avenue, Toronto, ON M4J 1M3
5. Once approved, you will receive your travel document or certificate of identity directly from Passport Canada.

Please note that additional documentation may be requested on an as-needed basis. English or French translations of documents not in English or French must also be provided.

APPLICATIONS MISSING THIS ORDER FORM WILL NOT BE PROCESSED

DOCUMENT CHECKLIST

- IMMIGROUP ORDER FORM**
- TRAVEL DOCUMENT APPLICATION FORM** (duly completed and signed by applicant and guarantor)
- PROOF OF IMMIGRATION STATUS IN CANADA** (PR Card, Protected Person Status Document, TRP. You must be in possession of the original document. An IMM 1000 is not acceptable proof of immigration status)
- 2 DOCUMENTS SHOWING PROOF OF IDENTITY.**
- ORIGINALS OR COPIES CERTIFIED BY A GUARANTOR** (Driver's License, Provincial / Territorial Photo ID, Health Card (except Alberta, Manitoba), Certificat de Selection, OAS Card, government employee ID)
- 2 PASSPORT PHOTOS** (one must be signed by guarantor)
- IF APPLICABLE:**
- ANY PREVIOUS TRAVEL DOCUMENT OR PASSPORT PROOF OF URGENCY ISSUED** (for urgent filing).
- Please note that there is no formal procedure for expediting this application and faster service is not guaranteed. Expediting of an application on humanitarian grounds is at the discretion of Passport Canada.
- IF your name has changed since birth, you must also include a copy of your **MARRIAGE CERTIFICATE OR LEGAL NAME CHANGE.**

SERVICE OPTIONS

<u>REGULAR SERVICE</u>	<u>URGENT PROCESSING</u>
\$282.50 <input type="checkbox"/> Including: \$250 Immigroup Service Fee \$32.50 HST Processing Time: approximately 20 calendar days Note: Timeline is entirely determined by government	\$390.50 <input type="checkbox"/> Including \$350 Immigroup Service Fee \$45.50 HST Proof of urgency required. Immigroup cannot guarantee urgent processing.

<u>ADDITIONAL INFORMATION</u>
*There will be two charges showing on your credit card. The first one is the Immigroup fee. The second charge you will see is the government fee of \$120 for a travel document or \$260 for a certificate of identity, as determined by Passport Canada.

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"/> CVW <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

*I assert that I am using Immigroup to apply for my Travel Document

*I understand that cancellation of this service after my order is received by Immigroup Inc. will bear a minimum cancellation fee of \$42.50

SIGN HERE:



Adult Travel Document Application

for stateless and protected persons in Canada (16 years of age or over)

Information
Protected

Warning—Any false or misleading statement with respect to this application and any supporting document, including the concealment of any material fact, may result in the refusal to issue a Canadian travel document, the revocation of a valid Canadian travel document, or the refusal of travel document services, and may be grounds for criminal prosecution. Your application will not be processed if you fail to complete all of the required sections of this form and/or refuse to consent to the exchange or disclosure of any personal information required for the delivery of travel document services.

Type or print in CAPITAL LETTERS using black or dark blue ink.

① Personal Information (see Instructions, section G)						
Surname (last name)						
Given name(s)						
Surname (last name) at birth				Former surname (last name)		
If travel document requested in spousal surname (last name), enter			Year of marriage	Surname (last name) of spouse		
Date of birth Year Month Day		Place of birth City Country				
Sex <input type="radio"/> Female <input type="radio"/> Male	Marital status	Eye colour	Current hair colour	Height (cm/in)	Weight (kg/lbs)	
Current home address						
Number		Street		Apartment	City	Province/Territory Postal code
Mailing address (if different from above)						
Number		Street		Apartment	City	Province/Territory Postal code
Telephone (daytime)		Telephone (other)		Cell number or email address (optional)		
Declaration —I understand that if I am issued a Canadian travel document and later obtain a passport issued by my country of citizenship, I am obliged to return the Canadian travel document to Passport Canada Program—Citizenship and Immigration Canada. I solemnly declare that the photos enclosed are unaltered and a true likeness of me, that all of the statements made and the information provided in this application, as well as any supporting documents, are true. I declare that I have read and understood the Warning at the top of this page and the Privacy Notice Statement (see section O). I consent to the collection, use and disclosure of my personal information by Passport Canada Program—Citizenship and Immigration Canada, other federal government institutions, Government of Canada offices abroad and third party entities as outlined in the Privacy Notice Statement in the Instructions.				Void if signature touches border		
				<div style="border: 1px solid black; width: 100%; height: 100%;"></div> Signature (see Instructions, section G)		
Date Year Month Day		Signed at City		Province/Territory		

② Declaration of Guarantor (see Instructions, section H)						
Note: Section to be completed by the guarantor only if the applicant has completed and signed all four (4) pages of this application form.						
Surname (last name)				Given name(s)		
Occupation				Name of firm/organization		
Telephone (daytime)		Telephone (other)		Cell number (optional)		
Business address						
Number		Street		City	Province/Territory/State	Postal/ZIP code
Declaration —I solemnly declare that I have known the applicant identified above personally for at least six (6) months. I have signed the back of one (1) photo to certify that the image is a true likeness of the applicant. If applicable, I have signed a copy of each document to support the applicant's identity to confirm that I have seen the original(s). I declare that I have read and understood the Warning at the top of this page and the Privacy Notice Statement (see section O). I consent to the collection, use and disclosure of my personal information by Passport Canada Program—Citizenship and Immigration Canada, other federal government institutions, Government of Canada offices abroad and third party entities as outlined in the Privacy Notice Statement in the Instructions.				I have known the applicant for Number of months		Signature of guarantor
						Date Year Month Day

Aussi accessible en français
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Proof of Immigration Status in Canada (see Instructions, section I)

To establish your immigration status in Canada, provide **one (1)** of the following valid documents (original only):

- Permanent resident card
- Protected person status document
- Verification of status
- Notice of decision
- Temporary resident permit

Document number	Date of issue Year Month Day	Date of expiry (if applicable) Year Month Day
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4

Previous Canadian Travel Document (see Instructions, section J)

In the last **five (5)** years, has a Canadian certificate of identity or Canadian refugee travel document been issued to you?

- No
- Yes (specify) ➤

Number	Date of issue Year Month Day
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If yes, include the travel document with your application.

Note: If a valid Canadian travel document has been lost, stolen, damaged or is inaccessible, complete form PPTC 203, Declaration, available online at passportcanada.gc.ca. **A Canadian travel document, once reported lost or stolen, is no longer valid.** There is an administrative fee for the replacement of a valid lost or stolen Canadian travel document (see section C).

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Citizenship and Travel Documentation (see Instructions, section K)

Note: If insufficient space, use section 8, Additional Information, or attach a separate signed and dated sheet.

What is your original citizenship?

Did you acquire any other citizenship? No Yes ➤ Indicate country

Do you have any valid or expired travel document or passport from any country other than Canada?

- No
- Yes ➤ Enclose the document (original only). If no longer in your possession, explain why.

Have you visited another country since your entry to Canada?

- No
- Yes (specify) ➤

Date left	Date returned	Country	Reason
Year Month Day	Year Month Day		
Year Month Day	Year Month Day		

Have you, since your date of entry to Canada, applied for a passport or travel document (or renewal of such a document) from your country of origin or citizenship?

- No ➤ Provide a detailed explanation of your reasons for not applying.

- Yes ➤ If the request was refused, enclose the letter of refusal. If unable to provide this letter, explain why. If no reply was received, write all the steps you have taken.

Signature of applicant

Date
Year | Month | Day

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Application for Canadian Citizenship (see Instructions, section L)

Note: If insufficient space, use section 8, Additional Information, or attach a separate signed and dated sheet with the additional personal information.

Have you applied for Canadian citizenship?

No Explain why you have not applied.

Empty text box for explanation.

Yes Enclose the receipt confirming payment of fees (IMM 5401) or, if applicable, a copy of the letter of refusal.

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Documents to Support Identity (see Instructions, section M)

Provide the following information. Include signed copies (both sides) or original documents.

Type of document	Document number	Date of expiry (if applicable) Year Month Day	Name as it appears on the document
Type of document	Document number	Date of expiry (if applicable) Year Month Day	Name as it appears on the document

8

Additional Information

Large empty text box for additional information.

Signature of applicant

Date
Year | Month | Day

9

Additional Personal Information

Note: If insufficient space, use section 8, Additional Information, or attach a separate signed and dated sheet.

A Addresses in the last **two (2)** years Same as current home address
 Different from current home address (complete below)

1.	From	Year	Month	To	Year	Month
2.	From	Year	Month	To	Year	Month

B Occupation in the last **two (2)** years my employers were and/or
 I was attending educational institutions and/or
 other, e.g. homemaker, unemployed or retired, as follows:

Employer/school or other	Address	Telephone (daytime)	Field of employment/studies	Date (from)	Date (to)

C **Mother's maiden name** Provide your mother's surname (last name) at the time of her birth.

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References

Provide the following information with respect to **two (2)** persons who are neither your relatives nor your guarantor and who have known you for at least **six (6)** months. They may be contacted to confirm your identity.

1. Surname (last name)		Given name(s)	
Relationship	Address (Number, Street, Apartment, City, Province/Territory/State, Country)		
Telephone (daytime)	Telephone (other)	Cell number or email (optional)	Has known me for Number of months
2. Surname (last name)		Given name(s)	
Relationship	Address (Number, Street, Apartment, City, Province/Territory/State, Country)		
Telephone (daytime)	Telephone (other)	Cell number or email (optional)	Has known me for Number of months

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Emergency Contact Information (optional)



We recommend that you provide the name of someone who would **not** normally travel with you. This information is helpful if you have an accident or become ill while travelling outside of Canada.

Surname (last name)		Given name(s)	
Relationship to applicant	Telephone (daytime)	Telephone (other)	Cell number
Current home address			
Number	Street	Apartment	City
		Province/Territory/State	Postal/ZIP code

Signature of applicant

Date
Year | Month | Day

7. Your representative's contact information

Name of firm or organization (if applicable)			
Mailing address			
Postal code/ZIP			
Telephone number	Country code	Area code	Number
	()		
Fax number	Country code	Area code	Number
	()		
E-mail address (if applicable)			

By indicating your representative's e-mail address, you are hereby authorizing Citizenship and Immigration Canada to transmit your file and personal information to this specific e-mail address.

8. Your representative's declaration:

- I declare that the information in Section B is truthful, complete and correct.
- I understand and accept that I am the person appointed by the applicant to conduct business on the applicant or sponsor's behalf with Citizenship and Immigration Canada and Canada Border Services Agency.

Signature of representative

Party ID (if known)

Date

SECTION C: CANCEL THE APPOINTMENT OF A REPRESENTATIVE

I withdraw my authorization for this person to serve as my representative, to receive information on my case file and to conduct business on my behalf with Citizenship and Immigration Canada and Canada Border Services Agency.

9. Your representative's full name

Family name (Surname)

Given name(s)

Name of firm or organization
(if applicable)
SECTION D: YOUR DECLARATION**10.**

- I declare that I have fully and truthfully answered all questions on this form and any attached application (if applicable).
- I also declare that I have read and understood all the statements on this form, having asked and obtained an explanation for every point that was not clear to me.

Signature of applicant

Date

Signature of spouse or common-law partner
(if applicable)

Date

Warning! It is a serious offence to give false or misleading information 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 your application according to the requirements of the Act. It will be retained in a Personal Information Bank identified in **Infosource**. The information may be shared with other organizations such as the Canada Border Services Agency (CBSA), the Royal Canadian Mounted Police (RCMP), the Canadian Security and Intelligence Service (CSIS), where there is an agreement or arrangement with a foreign government, in accordance with subsection 8(2) of the *Privacy Act*. Pursuant to the *Immigration and Refugee Protection Regulations*, the information may also be shared with a regulatory body that is responsible for governing or investigating the conduct of representatives, such as a provincial and territorial law society, the *Chambre des Notaires du Québec* and the Immigration Consultants of Canada Regulatory Council (ICCRC). 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: Photo specifications for the travel document are different from those for a permanent resident card. Your travel document application will be refused if your photos do not meet the following specifications:

IMAGE INFORMATION

- Photos must be taken with uniform lighting and not show shadows or flash reflection on the face and head. Photos with shadows on the face or background are unacceptable.
- Photos must show a full front view of the face with both edges of the face showing clearly. The face and shoulders must be centred in the photo and squared to the camera.
- Eyes must be open and clearly visible. Glasses, including tinted ones with prescription, may be worn as long as the eyes are clearly visible. Sunglasses are unacceptable.
- Facial expression must be neutral (not frowning or smiling) with the mouth closed.
- The image must be clear, sharp and in focus.
- Photos must be taken against a plain, uniform, white or light-coloured background.
- Photos must reflect/represent natural skin tones.
- The length from chin to crown of the head (natural top of head) must be between 31 mm and 36 mm (1¼ in. and 1 7/16 in.).
- Hats and other head coverings are not permitted except when worn for religious or medical reasons and only if the full facial features are clearly visible.
- Black and white or colour photos are acceptable.
- Photos must be originals, not taken from any existing photo, and must have been taken within the last 12 months.

QUANTITY AND FORMAT

- **Two (2)** identical unaltered photos produced from the same film or from the same electronic file capturing the digital image.

SIZE AND PAPER

- The photos must measure 50 mm x 70 mm (2 in. wide x 2 ¾ in. high) in size.
- Heavy weight paper is unacceptable.
- Photos must be printed on plain, high quality photographic paper.

PHOTOGRAPHER AND GUARANTOR

- Photos must be taken by a commercial photographer.
- The name of the photographer or studio, the address and the date the photo was taken (not the date the photo was printed) must be provided directly on the back of one photo (see illustration).
- The guarantor must clearly write on the back of **one (1)** photo: "I certify this to be a true likeness of *(applicant's name)*."

<p>Frame Height: 70 mm</p> <p>Min. Face Height: 31 mm</p> <p>Max. Face Height: 36 mm</p> <p>Frame Width: 50 mm</p>	<p>Photo Co. Ltd. 111 Any Street Any Town, COUNTRY</p> <p>Photo taken _____ Date _____</p> <p>I certify this to be a true likeness of <i>(applicant's name)</i></p> <p>_____ Guarantor's Signature</p>
<p>Not actual size. Refer to measurements above.</p>	