

## STATUS OF PARENT/GUARDIAN (ADMISSION TO CANADA AND RESIDENCY) –FORM A

To be completed and signed by a parent or legal (court-appointed) guardian. If legal guardian, attach a copy of court order appointing you as legal guardian.

**Name of Parent/Legal Guardian:** \_\_\_\_\_

**Name of Child(ren)** \_\_\_\_\_

### (Lawfully Admitted into Canada)

1. I am (*please ✓one*):

- A Canadian citizen (please attach a copy of parent's birth certificate, passport or citizenship paper/card).
- A Permanent Resident (please attach a copy of parent's landed immigrant status paper or Permanent Resident card).
- Lawfully admitted to Canada under the Immigration and Refugee Protection Act (Canada) with one of the following documents (please mark the appropriate box below and attach a copy of document):
  - Admission as a refugee or refugee claimant (a person claiming refugee status who has a letter of no objection).
  - Valid student permit for two or more years (or issued for one year but anticipated to be renewed for one or more additional years).
  - Valid employment authorization (work permit) for two or more years (or issued for one year but anticipated to be renewed for one or more additional years).
  - A person carrying out official duties under the authority of the Visiting Forces Act or as an accredited diplomatic agent, pre-clearance officer, consular officer or official representative in Canada of a foreign government with a consular post in British Columbia.
  - Other - document description: (must be cleared with Citizenship and Immigration Canada):

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### (Residency in British Columbia)

2. I am a resident of British Columbia (*please ✓one*):

- Yes Residency address: \_\_\_\_\_

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(Attach a recent copy of a driver's license, utility bill, mortgage document, rental agreement or tax assessment, etc.)

- No I am not a resident of British Columbia.

### Confirming signatures:

3. Parent/Legal Guardian's name: \_\_\_\_\_

Parent/Legal Guardian's signature: \_\_\_\_\_

Date: \_\_\_\_\_

*For Office Use Only:*

Proof of Residency: \_\_\_\_\_  
*Initials*

Date: \_\_\_\_\_



