

# CUSTODIANSHIP DECLARATION FOR MINORS STUDYING IN CANADA



## STUDENT INFORMATION

Surname	Given Name(s)	Citizenship	Date of birth dd/mm/yy	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Address where student will reside in Canada				

## CANADIAN SCHOOL INFORMATION

School Name	School Address
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## PARENT/GUARDIAN INFORMATION (PREFERABLY FROM BOTH PARENTS/GUARDIANS)

	Parent/Guardian 1	Parent/Guardian 2
Surname		
Given name(s)		
Current Address		
Citizenship		
Home/Cell Number		
Work Number		
Email		

## CUSTODIAN INFORMATION

Surname	Given Name(s)	Status in Canada <input type="checkbox"/> Canadian Citizen or <input type="checkbox"/> Permanent resident	Date of Birth dd/mm/yy
Current residential address		Home/Cell Number	
		Work Number	
		Email:	

My/Our Child will reside  with the appointed custodian.

I/We, \_\_\_\_\_ and \_\_\_\_\_ (name of parents/guardian), the parents/guardians of the said student,

\_\_\_\_\_ (name of student), hereby grant full custodianship to \_\_\_\_\_ (name of custodian), during the student's stay in Canada, while he/she is under the age of majority in the province in which he/she resides. I have made the necessary arrangements for the care and support of the said student such that the custodian should act in the place of me/us, the parents. By signing this custodian agreement, I/We affirm that I am/we are satisfied the above appointed custodian resides within a reasonable distance of my/our child's intended residence and school and will be able to fulfil his/her obligations as a custodian in the event of an emergency.

\_\_\_\_\_  
Signature of parent/guardian 1 Date

\_\_\_\_\_  
Signature of parent/guardian 1 Date

\_\_\_\_\_  
Signature of Custodian Date

Sworn before me at \_\_\_\_\_ (city), in the province of \_\_\_\_\_ (Province/territory),  
\_\_\_\_\_ (country,if applicable), This \_\_\_\_\_ day of \_\_\_\_\_ (month), \_\_\_\_\_ (year).

\_\_\_\_\_  
Signature Of Notary Date

Official Seal of Notary Public