



# APPLICATION FOR CANADIAN CITIZENSHIP - ADULTS (18 years of age and older) UNDER SUBSECTION 5(1)

FOR OFFICIAL USE ONLY	
UCI no.	
Certificate no.	

**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.

Refer to the guide for specific instructions. Please PRINT in ink or TYPE.

FOR OFFICIAL USE ONLY
Space reserved for applicant's label

**1. A Language you prefer for:**

Service:  English  French

**B I have special needs**

No  Yes ► If yes, explain:

**2. I have applied for Canadian citizenship before**

No  Yes ► When?   
Year

**3. A Name (exactly as it is shown on my immigration document)**

Last name (surname/family name)   
Given name(s)

**B Request for a different name to appear on certificate (subject to approval by Citizenship and Immigration Canada)**

Last name (surname/family name)   
Given name(s)

**C List any other names used including name at birth, maiden name, previous married name(s), aliases and nicknames. These names will not appear on your citizenship certificate.**

Provide details:

Last name (surname/family name)   
Given name(s)

**4. A Birth details as shown on my immigration document**

Date ►  Day  Month  Year  Place ► Town/City   
Country

**B Personal information**

Sex ►  Male  Female Height ►  cm OR  ft  in Colour of eyes ►   
Marital status ►  Never married  Married  Common-law  Widowed  Divorced  Legally separated

**5. A Home address**

**B Mailing address (if different from home address)**

No. and street		Apt. no.	No. and street		Apt. no.
City/Village		Province		City/Village	
Country		Postal code		Country	



**5. C Telephone number(s)**

Home

Area code	No.
(    )	-

Work

Area code	No.
(    )	-

Cell

Area code	No.
(    )	-

**D I have lived at this address**

	year(s)		month(s)
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**6. A Date you became a permanent resident (landed immigrant)?**

Year	Month	Day

**B When did you first come to live in Canada if different from "A"?**

Year	Month	Day

**C Are you a citizen of any other countries?**

No  Yes ► If yes, list the country(ies).

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**D Do you have permanent resident status in any other country?**

No  Yes ► If yes, list the country(ies) and provide the dates you acquired this status.

Country	Date		
	Year	Month	Day

**E Addresses in the last 4 years:**

List all of your addresses in Canada and foreign addresses in the last 4 years. If you were residing, employed or attending school outside Canada in the last 4 years, you **must** also indicate all your foreign addresses.

From	To	Address	City/Province/Country
Y M	Y M		



**8. CONSENT TO DISCLOSE PERSONAL INFORMATION****A CONGRATULATORY LETTER****Request for authorization**

Federal Members of Parliament (MPs) send a letter of congratulations to new citizens in their ridings. Do you authorize Citizenship and Immigration Canada to forward your name, address, gender and preferred official language to your Member of Parliament? No other information will be forwarded.

Yes  No

This information will be disclosed once your Canadian citizenship is granted.

**B NATIONAL REGISTER OF ELECTORS****Request for authorization**

Canadian citizens who are 18 years of age or older have the right to vote in federal elections and referendums.

Elections Canada needs your authorization to add your name to the National Register of Electors (voters) to ensure that you are included on the list of electors for federal elections and referendums.

**Do you authorize Citizenship and Immigration Canada to forward your name, address, gender and date of birth to Elections Canada so that this information can be added to the National Register of Electors?**

Yes  No

No information will be forwarded to Elections Canada until you acquire Canadian citizenship. By law this information will be used for electoral purposes only.

For more information, please refer to Section 8 of *How to complete this Form*.

**C QUÉBEC'S PERMANENT LIST OF ELECTORS**

Do you reside in Québec?  Yes  No

**Request for authorization**

To make sure that you are on the list of electors (voters) for provincial, municipal or school elections, the Chief Electoral Officer of Québec needs to add your name to Québec's Permanent list of electors.

**Do you authorize Citizenship and Immigration Canada to forward your name, address, gender and date of birth to the Chief Electoral Officer of Québec so that this information can be added to the permanent list?**

Yes  No

No information will be forwarded until you acquire Canadian citizenship. By law this information will be used for electoral purposes only. For more information, please refer to Section 8 of *How to complete this Form*.

**9. SIGNATURE OF APPLICANT**

**I agree to advise Citizenship and Immigration Canada if any information on this form changes before I take the Oath of Citizenship. I understand the contents of this form. I declare that the information provided is true, correct, and complete, and that the photographs enclosed are a true likeness of me. I understand that if I make a false declaration, or fail to disclose all information material to my application, I could lose my Canadian citizenship and be charged under the *Citizenship Act*.**

I have indicated in Section 7 of this form whether the prohibitions apply to me.

I hereby acknowledge that Section 10 below must be completed if an individual, firm or organization assisted me in the completion of this application. If Section 10 is blank, I confirm that I completed this form myself without any help.

**IMPORTANT NOTE:**

**Remember to make sure that you are eligible to apply for citizenship on the day BEFORE you sign this application.**

(you must sign inside the white box in black ink only)

 **Signature of APPLICANT**

City

Date

Year	Month	Day

Did you receive assistance in completing this form  No  Yes

**If yes, have the individual, firm or organization complete the following Section 10.**

**10. INDIVIDUAL, FIRM OR ORGANIZATION WHO ASSISTED IN THE COMPLETION OF THIS APPLICATION (The applicant does not complete this section)**

Name of individual who assisted in completing this application form

Name of firm, organization

Address

 **Signature of INDIVIDUAL**

Date

Year	Month	Day

**Protected Information  
Personal Information Bank CIC PPU 050**

The information you provided on the application is collected under the authority of the *Citizenship Act* and is required to determine whether your citizenship application may be approved. The information will be retained in the Personal Information Bank CIC PPU 050 identified in Infosource. It may be shared with other organizations in accordance or disclosed, without notice or consent, pursuant to s. 8(2) of the *Privacy Act*. Under the *Privacy Act* and the *Access to Information Act*, individuals have the right to protection of, access to and correction of their personal information. Details of these matters are available at [Infosource.gc.ca](http://Infosource.gc.ca), at [www.cic.gc.ca](http://www.cic.gc.ca), at the local CIC offices, at the CIC Call Centre and at any Canadian public library.