



APPLICATION FOR VISITOR VISA (TEMPORARY RESIDENT VISA)

If you need more space for any section, print out an additional page containing the appropriate section, complete and submit it with your application.

1 UCI	2 * I want service in	3 * Visa requested	OFFICE USE ONLY Validated
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PERSONAL DETAILS

1 Full name *Family name (as shown on your passport or travel document) 姓 (与护照一致)		Given name(s) (as shown on your passport or travel document) 名		
2 Have you ever used any other name (e.g. Nickname, maiden name, alias, etc.) ? Family name 姓		<input type="checkbox"/> * No <input type="checkbox"/> * Yes 曾用名, 否, 是 Given name(s) 名		
3 *Sex 性别	4 *Date of birth 出生年月日 YYYY MM DD	5 Place of birth 出生地 * City/Town * Country or Territory 国家或地区		
6 *Citizenship 国籍				
7 Current country or territory of residence: 现居地 Country or Territory 国家或地区 Status 身份 Other 其他 From 起始年月日至年月日 To * * * * * YYYY-MM-DD YYYY-MM-DD				
8 Previous countries or territory of residence: During the past five years have you lived in any country or territory other than your country of citizenship or your current country or territory of residence (indicated above) for more than six months? 五年内是否居住他国超过六个月 <input type="checkbox"/> * No 否 <input type="checkbox"/> * Yes 是 Country or Territory 国家或地区 Status 身份 Other 其他 From 起始年月日至年月日 To * * * * * YYYY-MM-DD YYYY-MM-DD				
9 Country or Territory where applying: Same as current country or territory of residence? <input type="checkbox"/> * No <input type="checkbox"/> * Yes 是否在现居地递交此申请? 否 是 Country or Territory 国家或地区 Status 身份 Other 其他 From 起始年月日至年月日 To * * * * * YYYY-MM-DD YYYY-MM-DD				
10 * a) Your current marital status 现婚姻状况		b) (If you are married or in a common-law relationship) Provide the date on which you were married or entered into the common-law relationship 结婚或同居起始日期 Date 年月日 YYYY-MM-DD		
c) Provide the name of your current Spouse/Common-law partner 现配偶名字 Family name 姓		Given name(s) 名		

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

This form is made available by Immigration, Refugees and Citizenship and is not to be sold to applicants.

(DISPONIBLE EN FRANÇAIS - IMM 5257 F)

Applicant Name	Date of Birth
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PERSONAL DETAILS (CONTINUED)

曾有婚史吗? 否 是

11 a) Have you previously been married or in a common-law relationship? <input type="checkbox"/> * No <input type="checkbox"/> * Yes b) Provide the following details for your previous Spouse/Common-law Partner: 前配偶名字 Family name 姓 Given name(s) 名					
c) Date of birth 出生年月日 YYYY MM DD		d) Type of relationship 与申请人关系		起始年月日 From YYYY-MM-DD	结束年月日 To YYYY-MM-DD

LANGUAGE(S)

1 *a) Native language/Mother Tongue 母语	*b) Are you able to communicate in English and/or French? 能否用英语或法语交流	c) In which language are you most at ease? 最擅长哪种语言?
d) Have you taken a test from a designated testing agency to assess your proficiency in English or French? <input type="checkbox"/> *No <input type="checkbox"/> *Yes 曾否参加官方语言考试? 否 是		

PASSPORT

1 * Passport number 护照号码	2 * Country or territory of issue 护照签发国	3 * Issue date 签发年月日 YYYY-MM-DD	4 * Expiry date 到期年月日 YYYY-MM-DD
5 * For this trip, will you use a passport issued by the Ministry of Foreign Affairs in Taiwan that includes your personal identification number? <input type="checkbox"/> *No <input type="checkbox"/> *Yes 此行程是否用台湾护照			
6 * For this trip, will you use a National Israeli passport? <input type="checkbox"/> *No <input type="checkbox"/> *Yes 此行程是否使用以色列护照? 否 是			

NATIONAL IDENTITY DOCUMENT

1 Do you have a national identity document? <input type="checkbox"/> *No <input type="checkbox"/> *Yes 是否有身份证? 否 是				
2 Document number 身份证号码	3 Country or territory of issue 身份证颁发国	4 Issue date 颁发年月日 YYYY-MM-DD	5 Expiry date 有效期截止年月日 YYYY-MM-DD	

US PR CARD 美国永居卡

是否是美国永居并持有绿卡? 否 是

1 Are you a lawful Permanent Resident of the United States with a valid alien registration card (green card)? <input type="checkbox"/> *No <input type="checkbox"/> *Yes	
2 Document number 证件号码	3 Expiry date 到期年月日 YYYY-MM-DD

CONTACT INFORMATION**If submitting your application by mail:**

- All correspondence will go to this address unless you indicate your e-mail address below.
- Indicating an e-mail address will authorize all correspondence, including file and personal information, to be sent to the e-mail address you specify.
- If you wish to authorize the release of information from your application to a representative, indicate their e-mail and mailing address(es) in this section and on the IMM5476 form.

1 Current mailing address 现通讯地址											
P.O. box	Apt/Unit	房间号	Street no. 街道号	* Street name 街道名	省/州	邮编	* City/Town 城市名	* Country or Territory 国家名	Province/State	Postal code	District 地区
2 Residential address 居住地址 是否与通讯地址一致 否 是											
Apt/Unit 房间号	Street no. 街道号	Street name 街道名	省/州	邮编	City/Town 城市/镇						
Country or Territory 国家或地区			Province/State	Postal code	District 地区						
3 Telephone no. 电话号码 <input type="checkbox"/> Canada/US <input type="checkbox"/> Other 加拿大/美国 其他						4 Alternate Telephone no. 其他电话号 <input type="checkbox"/> Canada/US <input type="checkbox"/> Other 加拿大/美国 其他					
Type 类别		Country Code No.		Ext.		Type		国家区号 号码		Country Code No. Ext.	
5 Fax no. 传真号 <input type="checkbox"/> Canada/US <input type="checkbox"/> Other						6 E-mail address 电子邮箱					

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DETAILS OF VISIT TO CANADA

1	* a) Purpose of my visit 此行目的	b) Other 其他	
2	计划逗留时间 Indicate how long you plan to stay <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> 起始年月日 * From YYYY-MM-DD </div> <div style="text-align: center;"> 至年月日 * To YYYY-MM-DD </div> </div>	3	* Funds available for my stay (CAD) 逗留时期资金 (加元)
4	Name, address and relationship of any person(s) or institution(s) I will visit: 将拜访个人或组织名称, 地址与关系		
1	* Name 名称 Relationship to me 与申请人关系 * Address in Canada 加拿大地址		
2	Name Relationship to me Address in Canada		

EDUCATION

有否高等学历 (包括大学, 学院或职业培训学校) 否 是

Have you had any post secondary education (including university, college or apprenticeship training)? <input type="checkbox"/> * No <input type="checkbox"/> * Yes If you answered "yes", give full details of your highest level of post secondary education. 如选择是, 填写最高学历			
1	From 起始年月 YYYY MM To 结束年月 YYYY MM	Field of study 专业 City/Town 城市名	School/Facility name 学校名称 Country or Territory 国家/地区 Province/State 省/州

EMPLOYMENT 就业经历

过去十年内就业细节, 包括政府岗位, 无空档期, 如退休, 无业或学习中, 请指明, 若退休请提供原职

Give details of your employment for the past 10 years, including if you have held any government positions (such as civil servant, judge, police officer, mayor, Member of Parliament, hospital administrator, employee of a security organization). Do not leave gaps. If retired, not working or studying, please indicate. If you are retired, please provide the 10 years before your retirement.				
1	From 起始年月 * YYYY * MM To 结束年月 YYYY MM	* Current Activity/Occupation 现职 * City/Town 城/镇	* Company/Employer/Facility name 公司/雇主/机构名称 * Country or Territory 国家/地区	Province/State 省/州
2	From YYYY MM To YYYY MM	Previous Activity/Occupation 前职位 City/Town 城/镇	Company/Employer/Facility name 公司/雇主/机构名称 Country or Territory 国家/地区	Province/State 省/州
3	From YYYY MM To YYYY MM	Previous Activity/Occupation 前职位 City/Town	Company/Employer/Facility name Country or Territory	Province/State

Applicant Name

Date of Birth

BACKGROUND INFORMATION 背景信息**You must complete this section if you are 18 years of age or older.**

过去两年内, 有否家人患肺部肿瘤或与肿瘤病人亲近接触? 否 是

1	a) Within the past two years, have you or a family member ever had tuberculosis of the lungs or been in close contact with a person with tuberculosis?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	b) Do you have any physical or mental disorder that would require social and/or health services, other than medication, during a stay in Canada?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	c) If you answered "yes" to question 1a) or 1b), please provide details and the name of the family member (if applicable). 若回答是, 请提供家人名及细节		

在加拿大是否有过非法逗留, 或非学习或工作? 否 是

2	a) Have you ever remained beyond the validity of your status, attended school without authorization or worked without authorization in Canada?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	b) Have you ever been refused a visa or permit, denied entry or ordered to leave Canada or any other country or territory?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	c) Have you previously applied to enter or remain in Canada?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	d) If you answered "yes" to question 2a), 2b), or 2c) please provide details. 若回答是, 请提供细节		

3	a) Have you ever committed, been arrested for, been charged with or convicted of any criminal offence in any country or territory?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	b) If you answered "yes" to question 3a) above, please provide details. 若回答是, 请提供细节		

4	a) Did you serve in any military, militia, or civil defence unit or serve in a security organization or police force (including non obligatory national service, reserve or volunteer units)? 是否参加过军, 民防或安全部门或警察机构 (包括非义务, 预备役或志愿者)?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
	b) If you answered yes to question 4a), please provide dates of service and countries or territories where you served. 若回答是, 请提供参加日期及服务国家		

是否是政党成员, 或参加过政治或宗教运动, 或有过犯罪行为

5	Are you, or have you ever been a member or associated with any political party, or other group or organization which has engaged in or advocated violence as a means to achieving a political or religious objective, or which has been associated with criminal activity at any time?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
6	Have you ever witnessed or participated in the ill treatment of prisoners or civilians, looting or desecration of religious buildings?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

有否目击或参加过迫害入监人员或平民, 或毁坏宗教建筑?

If you answered "yes" to any of questions 3 to 6 above, or upon request of a visa officer, you MAY BE REQUIRED to fill out IMM 5257 Schedule 1.

Applicant Name

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SIGNATURE 签名

Citizenship and Immigration Canada (CIC), or an organization at CIC's request, may want to contact you in the future to ask you about any services you received from CIC prior to the application process (such as participation in an information forum), during the application process (including the application process itself as well as orientation or accreditation services), and services received after arriving in Canada (including settlement, integration and citizenship). CIC will use this information, along with the information provided by other individuals, for research, performance measurement or evaluation purposes. CIC will not use this information to make any decisions about you personally.

Do you consent to be contacted by CIC, or an organization at CIC's request, in the future? (Y/N) ☐ No ☐ Yes

同意将来加拿大移民局或其组织联络你? 否 是

I consent to the release to Citizenship and Immigration Canada (CIC) and Canada Border Services Agency (CBSA) of all records and information for the purpose of processing my request that any government authority, including police, judicial and state authorities in all countries in which I have lived may possess about me. This information will be used to evaluate my suitability for admission to Canada or to remain in Canada pursuant to Canadian legislation.

I declare that I have answered all questions in this application fully and truthfully. 声明以上内容全部真实可信

Signature of Applicant or Parent/Legal Guardian's for a person under 18 years of age.

申请人签名

Date: YYYY-MM-DD

年月日

**IMPORTANT NOTE:**

This application must be signed and dated before it is submitted by mail.

Do not forget to include photos, fees (if applicable) and any other documents required. Review the application guide for more information and verify that you have completed and provided all of the required documents as per the document checklist.

DISCLOSURE

Information provided to IRCC is collected under the authority of the Immigration and Refugee Protection Act (IRPA) to determine admissibility to Canada. Information provided may be shared with other Canadian government institutions such as, but not limited to, the Canada Border Services Agency (CBSA), the Royal Canadian Mounted Police (RCMP), the Canadian Security Intelligence Service (CSIS), the Department of Foreign Affairs, Trade and Development (DFATD), Employment and Social Development Canada (ESDC), the Canada Revenue Agency (CRA), provincial and territorial governments and foreign governments in accordance with subsection 8(2) of the Privacy Act. Information may be disclosed to or validated with foreign governments, law enforcement bodies and detaining authorities with respect to the administration and enforcement of immigration legislation where such sharing of information may not put the individual and or his/her family at risk. Information may also be systematically validated by other Canadian government institutions for the purposes of validating status and identity to administer their programs.

Where biometrics are provided as part of an application, the fingerprints collected will be stored and shared with the RCMP. The fingerprint record may also be disclosed to law enforcement agencies in Canada in accordance with subsection 13.11(1) of the Immigration and Refugee Protection Regulations. The information may be used to establish or verify the identity of a person in order to prevent, investigate or prosecute an offence under any law of Canada or a province. This information may also be used to establish or verify the identity of an individual whose identity cannot reasonably be otherwise established or verified because of physical or mental condition. Canada may also share immigration information related to biometric records with foreign governments with whom Canada has an agreement or arrangement.

Depending on the type of application made, the information you provided will be stored in one or more Personal Information Banks (PIB) pursuant to section 10(1) of Canada's Privacy Act. Individuals also have a right to protection and access to their personal information stored in each corresponding PIB under the Access to Information Act. Further details on the PIBs pertaining to IRCC's line of business and services and the Government of Canada's access to information and privacy programs are available at the [Infosource website](#) and through the IRCC Call Centre. Info Source is also available at public libraries across Canada.