

Date: _____
Day /Month /Year

Mr. Robin Beech
Dean of Students
c/o International Student Services
McGill University
Brown Student Services Building, Suite 2100,
3600 McTavish Street, Montreal, Quebec H3A 0G3

Dear Mr. Beech,

Student's Information:

Name: _____

Date of birth: (dd/mm/yy): _____

Citizenship: _____

McGill ID Number: _____

CAQ application #: _____

Mailing address: _____

Phone Number: _____

Student's Email: _____

I recognize that my son /daughter (name) _____ is considered a minor until his/her eighteenth birthday on (date) _____.

As it is a requirement of the immigration laws of Quebec and Canada that all persons who are **under the age of seventeen**, be obliged to have a custodian in Canada and considering that my son /daughter will be attending full-time studies at McGill University in the Faculty of _____ during the 2024 - 2025 academic year commencing in September 2024,

I hereby authorize you to act as his/her official custodian until his/her seventeenth birthday. I understand that you will act as the primary contact between organizations such as police or government officials in cases of emergency. I also understand that this custodianship is only valid provided that (name) _____ resides in one of the McGill residences.

Sincerely,

Original Signature (Father)

Original Signature (Mother)

Print Name

Print Name

Passport Confidentiality Form

In addition to the *Custodianship Acknowledgement Letter*, you will also receive a copy of the Dean of Student's passport that must be included with your CAQ and Study Permit supporting documents. As the Dean of Student's passport contains confidential information, we ask that you (the student) sign the below declaration prior to providing you a copy of the Dean of Student's passport.

By signing the below, I hereby confirm that I will not use or share a copy of the Dean of Student's passport and the information contained in the passport with any other third party other than the appropriate immigration authorities.

Original Signature (McGill Student)

McGill ID Number

Print Name

Date (Day /Month /Year)