

## STATUTORY DECLARATION IN LIEU OF GUARANTOR FOR NON-CANADIANS APPLYING FOR A TRAVEL DOCUMENT

**WARNING** – Any false or misleading statement on this form or relating to any document in support of this application, including concealment of any material fact, may lead to refusal or revocation of a Certificate of Identity or Refugee Travel Document and be grounds for criminal prosecution.

This form must be sworn or declared before, and signed by, a person authorized by law to administer an oath or solemn affirmation.

PRINT OR TYPE IN CAPITAL LETTERS using black or dark blue ink.							
APPLICANT'S PERSONAL INFORMATION							
Surname (last name)		Given name(s)	/en name(s)		UCI		
Date of birth Pl	ace of birth						
0000(1111 PP)		_					
(YYYY-MM-DD) Cit	(YYYY-MM-DD) City Province/Territory/State (if applicable) Country						
DECLARATION OF APPLICANT							
I am unable to obtain any person within the groups listed in the application form to act as guarantor for the following reason:							
2 I have presented the following identification documents, which bear my signature, to the official below:							
<u> </u>							
Type of document Document number							
<u>B</u>							
Type of document				Document number			
3 The statements in my application for a Certificate of Identity or Refugee 1				Document, dated	, for	myself or	
(YYYY-MM-DD)							
my child, , are correct in all respects.							
Child's name							
DECLARATION – I solemnly declare that the statements made in this declaration are true. The photos attached hereto, marked "Exhibit A", are true							
photos of myself or of my child.							
Date Si	igned at						
(YYYY-MM-DD) City Province/Territory/State (if applicable) Signature of applicant							
DECLARATION OF OFFICIAL							
Surname (last name)				Given name(s)			
Occupation:							
Commissioner for Oaths Justice of the peace Lawyer Notary public							
Business address							
Number Street Suite City				Province/Territory/State (if applicable) Country Postal/Zip code			
Telephone (daytime) Telephone (other)			Cell number or email address (optional)				
DECLARATION — made in my presence Under oath Solemn declaration							
Signed at   Date						Date	
			Jigited	aı		Date	
Signature of official			City	Province/Territory/State	(if applicable)	(YYYY-MM-DD)	
The Official must also certify and sign one of the photos on the reverse side with the statement, "This is "Exhibit A" to the Statutory Declaration of							
(Name) declared before me on (Date) at (Place)" (Signature of Official).							

