

Date: _____
Day /Month /Year

Mr. Christopher Buddle
Dean of Students
c/o International Student Services
McGill University
Brown Student Services Building, Suite 5100,
3600 McTavish Street, Montreal, Quebec H3A 0G3

Dear Mr. Buddle,

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 2018 - 2019 academic year commencing in September 2018, 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