

Use of a Representative Form

A representative is someone who has your permission to conduct business on your behalf with the Department of Advanced Education, Skills and Labour. *You may have one representative only.* If you appoint an additional representative, the previous representative will no longer be authorized to conduct business on your behalf and receive information on your case file.

Your dependent children aged 18 years and older must complete their own copy of this form if they have a representative.

I am: **Appointing a representative. Complete Section A, B and E. Your representative must complete Section C.**

Cancelling the appointment of a representative. Complete Section A, D and E.

Section A - Applicant Information

Last name: _____

First name: _____

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

Section B – Appointment of a Representative

- I authorize the following individual to serve as my representative and to conduct business relating to my PNP application on my behalf with the Department of Advanced Education, Skills and Labour, Office of Immigration and Multiculturalism.
- I authorize the Department of Advanced Education, Skills and Labour, Office of Immigration and Multiculturalism to release information from my case file and that of my dependent children under 18 years of age to my representative. This authorization is in accordance with the Newfoundland and Labrador *Access to Information and Protection of Privacy Act, 2015.*

1. **Your representative's full name:** _____
LAST NAME, First name

2. **Your representative is a member in good standing of:**

- | | |
|--|--|
| <input type="checkbox"/> Immigration Consultants of Canada Regulatory Council (ICCRC) | Membership ID #: _____ |
| <input type="checkbox"/> A Canadian provincial or territorial law society | Province or Territory: _____ Membership ID #: _____ |
| <input type="checkbox"/> Chambre des notaires du Québec | Membership ID #: _____ |
| <input type="checkbox"/> Other: _____ | |

3. Your representative's contact information

Name of firm or organization (if applicable): _____

Mailing address: _____

Telephone number: _____

Email address: _____

Section C – Representative's Declaration and Acceptance of Appointment

Your representative must review and sign the following:

- I declare that the information in Section B is truthful, complete and correct.
- I understand and accept that I am the person appointed by the applicant to conduct business relating to their Provincial Nominee Program application on their behalf with the Department of Advanced Education, Skills and Labour, Office of Immigration and Multiculturalism.

Signature of representative

Date (year/mm/dd)

Section D – Cancel the Appointment of a Representative

I withdraw my authorization for this person to serve as my representative, to receive information on my case file, and to conduct business relating to my Atlantic Immigration Pilot Program or Provincial Nominee Program application on my behalf with the Department of Advanced Education, Skills and Labour, Office of Immigration and Multiculturalism.

Name of representative: _____ LAST NAME, First name

Name of firm or organization (if applicable): _____

Section E – Your Declaration

- I declare that the information I have given is truthful, complete and correct.
- I understand all the previous statements, having asked for and obtained an explanation for every point that was not clear to me.

Signature of applicant: _____
Date (year/mm/dd)

Signature of spouse (if applicable): _____
Date (year/mm/dd)

The Department of Advanced Education, Skills and Labour, Office of Immigration and Multiculturalism does NOT require the use of paid representatives in the immigration process and it is your choice to retain assistance.