Manitoba
Labour and Immigration

Information Release Form
(MBREL)

I _____ Date of Birth _____
Principal Applicant's Full Name – Family Name, Given Name(s) Day/Month/Year
of
_____
Address

in the city/town of _____ country of _____

do hereby authorize the designated representatives of the:

Manitoba Labour and Immigration (the Department)
Immigration Promotion and Recruitment Branch
and/or
Citizenship and Immigration Canada
Immigration Section

to exchange all personal information contained in my application for the Manitoba Provincial Nominee Program OR my Immigrant Application Form (IMM 0008) regarding myself or any dependent member of my family.

I also authorize this information to be shared with other parties in Manitoba for the purpose of assessing my application for the Manitoba Provincial Nominee Program. I understand that Manitoba may contact such parties to verify information provided by me in this application. I understand that I have the right to examine and request corrections or amendments to my personal records, whether held by a provincial or federal government office.

Any information provided to Manitoba will only be disclosed under the *Freedom of Information and Protection of Privacy Act.* I consent to the disclosure of the above noted information by these persons, departments, agencies and organizations to the Department and the Department disclosing to these persons, departments agencies or organizations such personal information as may be necessary to obtain the information required by the Department for the Program.

_____ _____
Signature of Principal Applicant Witness

_____ _____
Signature of Spouse Witness

Signed at: _____ Date:_____
City/Town and Count