

| FOR OFFICE USE ONLY PEI-NP-05 | |
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| Applicant Reference # | |

PRINCE EDWARD ISLAND NOMINEE PROGRAM INFORMATION RELEASE FORM

| Principal Applicant's | | | |
|--|-----------|-------------------------|--|
| Family Name: Given Name(s) | | | |
| Residence: | | Date of Birth: | |
| City/Town: | Country | Day/Month/Year | |
| • I do hereby authorize the designated representatives of the: | | | |
| Immigration and Investment Division Department of Development and Technology Prince Edward Island and/or Immigration Section Immigration Processing Centre Citizenship and Immigration, Canada | | | |
| to exchange all personal information contained in my application for the Prince Edward Island Nominee Program OR my Application for Permanent Residence Form (IMM 0008) and Additional Family Information Form (IMM 5406) and schedules, regarding myself or any dependant member of my family. | | | |
| • I also authorize this information to be shared with other parties in Prince Edward Island for the purpose of assessing my application for the Prince Edward Island Nominee Program. | | | |
| • I understand that Prince Edward Island 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. | | | |
| Signature of Principal Ap | pplicant: | Witness: | |
| Signature of Spouse: | | Witness: | |
| Signed at:City/Town and Country | | Date: Day/Month/Year | |

Personal information on this form is collected under the Prince Edward Island Nominee Program and will be used for immigration and program evaluation purposes. If you have any questions about this collection of personal information, you may contact a Program Officer, Department of Development & Technology, Immigration & Investment Division, 94 Euston St., 2nd floor, Charlottetown, PE Canada, C1A 7M8. Phone (902) 894.0351.