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FOR OFFICE USE ONLY PEI-NP-09	
Applicant Reference #	_

## PRINCE EDWARD ISLAND NOMINEE PROGRAM RELEASE OF INFORMATION FOR EVALUATION

I	_ DOB (d/m/y)
Principal applicant full name - family name, given name(s)	
I	_ DOB (d/m/y)
Spouse's full name - family name, given name(s)	
of	
Address	
in the city/town of	country of
I consent to the Prince Edward Island Department of Device Collecting any information, including information pertain Insurance numbers, marital status, employment, income, government programs or any other relevant personal information to verify my involvement in the Prince Edward Island purpose of locating and contacting me regarding evaluation of the Department collecting this information from the Touch as Canada Customs and Revenue Agency Resources Development Canada, Prince Edward Island Dother person, department, agency or organization holding I consent to the disclosure of this information by these pet to the Department and the Department disclosing to these such personal information as may be necessary to obtain the Program.	ing to our address, telephone number, Social assets, liabilities, benefits received under other rmation (Island Nominee Program (the Program) and for uating the program and my participation in it.  com any federal, provincial or municipal (Citizenship and Immigration Canada, Human Department of Health and Social Services), or any such information.
Principal Applicant signature	Witness
Spouse's signature	Witness
Signed at:	Date:

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., 2<sup>nd</sup> floor, Charlottetown, PE Canada, C1A 7M8. Phone (902) 894.0351.