

**AUTHORIZED REPRESENTATIVE LETTER (Employer)
Provincial Nominee Program (PNP)**

PNP File No (for office use only):

This form is used to give BC PNP staff authorization to release information regarding a BCPNP file to an employer's authorized representative. If you have any questions about the collection, use and disclosure of this information, contact the British Columbia Provincial Nominee Program, by telephone: (604) 775-2227, Fax: (604) 660-4092 or by e-mail: PNPInfo@gov.bc.ca.

THIS FORM MUST BE REPRODUCED ON COMPANY LETTERHEAD

I, of authorize the
(Name) (Name of Company)

release of any information from my British Columbia Provincial Nominee Program (BC PNP) file, for the purpose of assisting me with the BC PNP and immigration process, to:

My authorized representative, , of
(Name of Representative) (Name of Company)

Located at . My authorized representative can be reached by
(Company Address)
email at or by phone at .
(Email of Representative) (Phone Number of Representative)

British Columbia supports new federal regulations requiring all paid immigration representatives to meet the definition of "authorized representative". As such, please indicate the following:

My representative is a member of:

The Canadian Society of Immigration Consultants.
(Membership ID Number)

A Canadian provincial or territorial law society.

(Province) (Membership ID Number)

Signed this _____ day of _____, 20 ____.

(Signature of Employer)