

Ministry of Economic Development Mailing Address: Suite 730 - 999 Canada Place Vancouver BC V6C 3E1

NOMINEE INFORMATION FORM Provincial Nominee Program (PNP)

PNP File No (for office use only):

The information on this form is collected for the purpose of administrating the Provincial Nominee Program as authorized by the Agreement for Canada/BC Cooperation on Immigration and will be used to collect data for assessment of individual applications under the Provincial Nominee Program. The information will be used for purposes of evaluating the Provincial Nominee Program. Personal information will be used and disclosed in accordance with the privacy protection provisions of the *Freedom of Information and Protection of Privacy Act* (RSBC 1996, c. 165). 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

If additional sheets are required to complete this form, write IMB 03 and the name of the prospective employee on the top of each additional page.

A. Prospective Employee Information

Prospective Employee Family Name:	Prospective Employee Given Name:		Date of Birth (dd/mm/yyyy)		Telephone Number:	
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Spouse Family Name, if applicable:	Spouse Given Names, if applica	ble:	Date of Birth (dd/mm/	уууу)	E-mail Address	s, if applicable:
Current Residential Address of Prospec	tive Employee: (unit, street)	Name	of Town/City:	Name of Co	untry:	Postal Code:
Mailing Address of Prospective Employe	ee, if different: (unit, street)	Name	of Town/City:	Name of Co	untry:	Postal Code:

B. Education in British Columbia

Has the Prospec	tive Employee st	udied in British Columbia: Yes	No If yes, complete the following:		
From (mm/yy)	To (mm/yy)	Name of Educational Institution:	City of Institution:	Course, Degree, Certificate:	

C Employment in British Columbia

Has the Prospective Employee worked in British Columbia: Yes In No If yes, complete the following:				
From (mm/yy)	To (mm/yy)	Occupation:	Name of Employer	City of Employer

D. Relatives in British Columbia: (prospective employee and/or spouse)

Complete the following information for any relatives living in British Columbia:

Name of Relative	Relationship to Employee	Town/City of Relative	Years in Canada

E. Relatives in Other Provinces/Territories of Canada: (prospective employee and/or spouse)

Complete the following information for any relatives living in Other Provinces/Territories of Canada:						
Name of Relative	Relationship to Employee	Town/City of Relative	Province of Relative	Years in Canada		

F. Reason for Current or any Previous Stays in British Columbia

Indicate the reason for your visit to British Columbia (tourism, work, studies, business, claiming refugee status, other - please specify):				
Reason for visit to British Columbia (please specify):	Entry in BC (mm/yy)	Exit from BC (mm/yy)		

G. Spouse's Guaranteed Employment (if applicable)

Employer/Company Name:	Employer Phone No.:	o.: Name of Supervisor/Personnel Officer: Proposed Annual Salary:			
		l			
Address of Employer: (unit, street)	Name of Town/City:		Postal Code:	Job Title Offered:	
H. Assistance in Completing Application:	*			r	
Did you have help preparing your PNP immigration appl	ication form?	Yes	No		
If yes, who provided this assistance?	bloyer	Immigratio	on Consultant		
Lawyer	Lawyer Other (please specify):				
I. British Columbia Provincial Nominee Prog	ram				
How did you learn about the Provincial Nominee Program	m? [Please check 🗵 the	appropriate bo	ox(es)]		
Employer BC Promotion Materials PNP Website					
Visa Office	Other (please specify):				
J. Declaration of Prospective Employee and	Spouse				
I declare that the information I have given in this application is truthful, complete and correct.					
I understand that any false statements or concealment of information may result in British Columbia refusing my application or, if applicable my nomination.					
I understand that information provided in this form may be used for purposes of evaluating the Provincial Nominee Program.					
I understand all the foregoing statements, having asked for and obtained explanation on every point which was not clear to me.					
Signature of Prospective Employee:			Da	te Signed	(dd/mm/yyyy)
Signature of Spouse:			Da	te Signed	(dd/mm/yyyy)