



**Saskatchewan  
Government Relations  
and Aboriginal Affairs**

**Foreign Student Post  
Graduation Work Permit  
Category Release Form**

**AUTHORITY TO DISCLOSE COMPANY INFORMATION**

We authorize the SINP to share information with Human Resources and Skills Development Canada (HRSDC) and Citizenship and Immigration Canada (CIC) and any other federal /provincial/territorial departments and their agencies as well as municipal governments, unions and associations and other appropriate organizations as deemed appropriate by the SINP.

We certify that all information provided by our company to the SINP is true and accurate

Completion of this form is voluntary; however, failure to provide any of the information may mean your request for a foreign worker may be turned down. (Please print clearly)

Occupation: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Web Site: \_\_\_\_\_

\_\_\_\_\_  
Signing Officer (Please Print)

\_\_\_\_\_  
Position

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_