

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

PNP File No (for office use only):

This form is used to give BC PNP staff authorization to release information on an applicant's file to the employer and an authorized representative where applicable (ie. Lawyer, Consultant, etc). 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.

I, _____ of _____ authorize the
(Name) *(Address)*

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

My employer in Canada, _____, of _____
(Name of Employer) *(Name of Company)*

Located at _____
(Company Address)

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 authorized 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 Employee)