

MANITOBA PROVINCIAL NOMINEE PROGRAM AFFIDAVIT OF SUPPORT (MAS)



Date received
by Manitoba



Who should complete this form?

- **Family Support stream:** The close relative named by the applicant must complete this form.
- **General stream:** two distant relatives or two friends named by the applicant must each complete their own MAS form.
- This form cannot be signed by a paid immigration representative or anyone who is not a relative or friend of the principal applicant and/or the principal applicant's family.
- This form cannot be signed by any elected official in Canada or his/her staff.

PART 1: DECLARATION OF SUPPORT

- This section must be completed by the signatory of this Affidavit of Support.
- Close relatives must include documents demonstrating relationship to the applicant and/or spouse/common-law partner, if applicable.
- Close relatives and distant relatives or friends who sign this affidavit must include proof of Canadian citizenship or permanent resident status and proof of established residence in Manitoba for at least one year (eg. Canadian passport, record of landing, permanent resident card, Manitoba Health Card).

I, _____ of _____
Name Address including city and postal code

Date of birth E-mail address Phone number (day) Phone number (evening)

MAKE OATH AND SAY THAT:

1. I am a Canadian citizen or permanent resident of Canada and I have lived in Manitoba for at least one year.
2. I am a close relative, distant relative or friend of the principal applicant or his/her spouse named below and that I have provided documentation proving that I am a close relative of this individual and/or a personal letter of support (MAS page 4) if the individual and/or spouse, if applicable, is/are my friend or distant relative.

Name and address of my relative or friend who is applying to the MPNP:

Family name Given name

Address including city, country, postal code

Describe your exact relationship to this person. (Be specific. For example: "my spouse's sister" or "my cousin [mother's brother's son]" or "my personal friend.")

3. I declare that my spouse, if applicable, agrees with the terms and conditions contained in this affidavit.
4. I declare that I clearly understand that the applicant(s) to the Manitoba Provincial Nominee Program named below must make a formal declaration of their intention to live and work in Manitoba, that I will not knowingly support the application of individuals who do not intend to live in Manitoba, and that I will be prohibited from supporting other relatives or friends in the future if the applicant named on this affidavit (and/or any dependants) does not settle successfully and permanently in Manitoba.

Name of principal applicant Name of spouse

Names of all accompanying dependants (use additional page if required):

5. I am satisfied that the applicant has the required amount of settlement funds (\$10,000 Cdn for a principal applicant and \$2,000 Cdn for each accompanying family member) and/or a bona fide offer of long-term, full-time employment in Manitoba and/or a signed declaration of financial support by the close relative signing this affidavit, and I am aware that the MPNP may refuse any applicant who cannot provide evidence of sufficient settlement funds.

6. I am prepared to assist the applicant and his/her family to establish successfully in Manitoba as follows:

7. I declare that I have known the principal applicant and/or spouse for:

One year or more

Less than one year

How long? _____

Never met

8. I declare that I have also supported or sponsored other relatives or friends as immigrants to Canada.

Yes

No

If "Yes," give details below (attach additional page if required):

Name	Date of application	Type of program (eg. provincial nominee, federal family class)	Date landed in Canada
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Address and telephone number of other person(s) I supported or sponsored:

Employer of other person(s) I supported or sponsored:

Address and telephone number of other person(s) I supported or sponsored:

Employer of other person(s) I supported or sponsored:

9. I affirm that I have not received or been promised payment or other consideration for signing this affidavit of support.

10. I declare the information provided is true, complete and accurate, and I give consent to Manitoba to verify any information I have provided in this affidavit of support.

11. I understand that the provision of any false statements or concealment of any material fact may result in, but is not limited to, some or all of the following consequences:

- refusal to approve this support or future support to other applicants
- refusal to grant or withdrawal of the principal applicant's Certificate of Nomination
- other enforcement action

12. I understand and am prepared to comply with all the commitments and obligations contained in this affidavit of support, having asked for and received an explanation on every point about which I may have been uncertain.

13. I swear this support to be bona fide.

AFFIRMED and SWORN before me at _____)

(city))
in the province of Manitoba,)
this day of _____ 20 _____)
(day/month) (year)

Signature of person swearing affidavit

Signature of notary public/commissioner for oaths

Name of notary public in and for Manitoba or commissioner for oaths:

My commission expires:

In Manitoba it is illegal for a commissioner for oaths to charge a fee to sign this document. A notary public may charge a fee.

PART 2: DECLARATION OF FINANCIAL SUPPORT BY CLOSE RELATIVE ONLY

- This section should be completed only by the Manitoba close relative of an applicant who cannot demonstrate sufficient settlement funds as described in the MPNP application kit.
- Close relatives declaring support must include financial documents such as their bank statements, tax statements, proof of assets (property, investments, etc.), proof of employment (including salary information) etc.

I, _____ of _____
Name Address including city and postal code

Date of birth

E-mail address

Phone number (day)

Phone number (evening)

MAKE OATH AND SAY THAT:

1. I will ensure that all processing and right of landing fees, medical and transportation costs and any other pre-arrival costs of the principal applicant and his/her accompanying dependants are paid.
2. I hereby agree to ensure that the essential needs of the principal applicant and any accompanying dependants are met from the date of landing in Canada including, but not limited to, providing shelter, food, clothing and other goods or services necessary for day-to-day living in Manitoba as well as the dental care, eye care and other healthcare needs not provided by Manitoba Health.
3. I hereby accept full responsibility for ensuring that the principal applicant and his/her accompanying dependants shall not rely on any social assistance or other government income-support program in Manitoba or other Canadian province or territory.
4. I affirm that this support cannot be terminated once the Manitoba has issued a Certificate of Nomination for the principal applicant and accompanying dependants.
5. I permit the sharing, release and exchange by and to Manitoba and the Government of Canada as necessary of any personal, financial or corporate financial information on the understanding that this information may be used to assist in verifying, assessing, evaluating, monitoring and enforcing this affidavit of support.
6. I have sufficient financial resources and expertise to fulfill this affidavit of support and have provided a confirmation-of-employment letter, bank records and ownership documents to demonstrate my financial ability to honour the commitments I have made in this affidavit of support.
7. I agree to be the principal contact and representative for my relative in Canada and I understand that Manitoba will not recognize any paid immigration representative with respect to the processing of his/her application for permanent resident status in Canada where this financial declaration of support has been included in the application.
8. I declare the information provided is true, complete and accurate and I give consent to Manitoba to verify any information I have provided in this declaration if financial support.
9. I understand that the Manitoba Provincial Nominee Program is not a sponsorship program and that all applicants will be assessed on the basis of their education, work experience and demonstrated ability to settle successfully in Manitoba.
10. I swear this declaration of financial support to be bona fide.

AFFIRMED and SWORN before me at _____)

(city))
in the province of Manitoba,)
this day of _____ 20 _____)
(day/month) (year)

Signature of person swearing affidavit

Signature of notary public/commissioner for oaths

Name of notary public in and for Manitoba or commissioner for oaths:

My commission expires:

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PART 3: PERSONAL LETTER OF SUPPORT BY FRIEND OR DISTANT RELATIVE

General stream: all distant relatives or friends of applicants applying to the General stream must complete this section.

Please describe how you know the applicant and why you are supporting his or her application to the Manitoba Provincial Nominee Program. (Attach additional pages if necessary.):

AFFIRMED and SWORN before me at _____)

(city))
in the province of Manitoba,)
this day of _____ 20 _____)
(day/month) (year)

Signature of person swearing affidavit

Signature of notary public/commissioner for oaths

Name of notary public in and for Manitoba or commissioner for oaths:

My commission expires:

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The personal information on this form is collected under the authority of Manitoba's *Freedom of Information and Protection of Privacy Act* (S 36 1b). Personal information is necessary for the Manitoba Provincial Nominee Program and is used and/or disclosed to assess your application to this program. Under the provisions of the act individuals have the right to protection of, and access to, personal information. For information contact:

**Access and Privacy Services - Government Records Office
Archives of Manitoba**

130 - 200 Vaughan Street, Winnipeg, Manitoba, Canada R3C 1T5
Phone: 204-945-3738 Toll-free: 1-800-617-3588 (in Manitoba)
Fax: 204-948-2008 E-mail: govrecs@gov.mb.ca
Website: gov.mb.ca/chc/fippa/index.html

A FIPPA request should be made on the Application for Access form, which is available on the Manitoba government website.