



Office of Immigration
Office de l'immigration

For Office of Immigration Use Only Date:
Applicant File Number: Employer File Number:

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Nova Scotia Nominee Program
NSNP 50 - Use of a Representative

A representative is someone who has your permission to conduct business on your behalf with the Province of Nova Scotia. You may have one representative only. If you appoint an additional representative, the previous representative will no longer be authorized to conduct business on you behalf and receive information on your case file.

The Province of Nova Scotia does NOT require the use of paid representatives in the immigration process and it is your choice to retain assistance.

Your dependent children aged 18 years or older must complete their own copy of this form if they have a representative.

- I am:
[] Appointing a representative. Complete Sections A and C.
[] Cancelling the appointment of a representative. Complete Section B and C.

SECTION A: APPOINTMENT OF A REPRESENTATIVE

- I authorize the following individuals to serve as my representative and to conduct business on my behalf with the Province of Nova Scotia.
I authorize the Province of Nova Scotia to release information from my case file and that of my dependent children under 18 years of age to my representative. This authorization is in accordance with the Nova Scotia Freedom of Information and Protection of Privacy Act.
I am aware that any information which would be subject to exemption, if I had the right access under the Nova Scotia Freedom of Information and Protection of Privacy Act, will likely not be released.

1. Your Representative's full name:
family name(s) given name(s)

- 2. Your Representative is or will be paid and is a member in good standing of:
[] the Canadian Society of Immigration Consultants Membership ID number:
[] a Canadian provincial or territorial law society Which province or territory? Membership ID number:
[] the Chambre des notaires du Québec. Membership ID number:

3. Your Representative's contact information:
Name of firm or organization (if applicable)
Mailing address
Postal code/ZIP
Telephone number: Country code Number Fax number: Country code Number
Email address:

4. Your Representative's declaration:

- I declare that the information in Section A is truthful, complete and correct.
- I understand and accept that I am the person appointed by the applicant to conduct business on the applicant's behalf with the Province of Nova Scotia.

Signature of representative	Date (mm/dd/year)
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SECTION B: CANCEL THE APPOINTMENT OF A REPRESENTATIVE

I withdraw my authorization for this person to serve as my representative, to receive information on my case file and to conduct business on my behalf with the Province of Nova Scotia.

<i>family name(s)</i>	<i>given name(s)</i>
<i>Name of firm or organization (if applicable)</i>	

SECTION C: YOUR DECLARATION

- 5.**
- I declare that the information in Section A is truthful, complete and correct.
 - I understand all the foregoing statements, having asked for and obtained an explanation for every point that was not clear to me.

Signature of applicant	Date (mm/dd/year)
Signature of spouse or conjugal or common-law partner (if applicable)	Date (mm/dd/year)