

**Language Proficiency Agreement
For Immigrant Partner and Immigrant Entrepreneur Pilot Project**

I, _____, born on (d/m/y) _____
declare that within one (1) year of landing in Canada, I will provide proof to Island Investment
Development Inc. that I have attained a moderate level of proficiency in speaking, reading,
writing and listening in English and/or French.

In support of this undertaking, I have pledged a deposit of \$20,000. CAD to be held in trust by
the Province of PEI for a maximum of one year after I am granted permanent resident status by
the Government of Canada. The deposit is fully refundable, without interest, provided that I am
able to provide evidence satisfactory to the Province of PEI that I have attained a moderate
level of proficiency in speaking, reading, writing, and listening in English and/or French.

Conditions Precedent to Refund of the Language Proficiency Deposit Pledged by an Immigrant

- (i.) To provide proof of attaining a moderate level of proficiency in speaking, reading,
writing, and listening in English and/or French and thereby redeem the deposit,
the immigrant will be required to attend and pass an interview with a Program
Officer in PEI. If the Program Officer determines a moderate level has been
reached, the deposit will be refunded. If the Program Officer determines a
moderate level has not been reached, the immigrant may take a standardized
test from a recognized third party testing provider. If the immigrant passes that
test, the deposit will be refunded. If not, the deposit will be forfeited.

Within one year of the date of landing, the Provincial Nominee must contact the Province of PEI
to set up an interview to prove that the conditions precedent to refund have been met. In the
event that the applicant fails to notify the province, before the one (1) year anniversary date of
landing, the deposit will be forfeited.

Within seven business days of receiving the interview request, the Province will schedule a time
and date for the interview.

Applicant Signature

Date: d/m/y

Witness Signature

Date: d/m/y

Witness Name (please print)

Witness Profession (please print)