## SETTLEMENT PLAN



## Part 2 - ENDORSEMENT OF MANITOBA RELATIVE

Part 2 of the Settlement Plan must be filled in by the principal applicant's declared close relative. In this form you are asked to describe how you will help the applicant achieve his or her plan to settle and find employment in Manitoba.

## How to complete this form

1. Personal information

First, read the applicant's Settlement Plan. If the applicant has not yet sent you a copy of his/her plan please request they do so. Next, print this form and answer all questions. Write your answers in the space provided. If you require more space to answer any question use the blank page at the end of this form.

After you complete this form, sign it and submit it to the MPNP along with the identification documents listed on page 5 to prove your relationship with the applicant and your Manitoba residence. (To endorse a Settlement Plan you must have been living in Manitoba as a permanent resident for at least one year.)

Your family name:	Given name(s):	
Birth date:		
Address:		
Street, city/town, postal code	E-mail	Phone
2. Relationship to applicant		
Applicant's family name:	Given name(s):	
How long have you known the applicant?		
Have you met the applicant in person? Yes No		
If yes, how did you meet?		
Please describe your relationship with the applicant.		

3. Accompanying family members of the applicant				
List the names of the applicant's spouse or common-law partner and all dependent children (if applicable).				
4. Your Settlement Plan for the applicant				
Describe how you will assist the applicant and accompanying family members (if applicable) with the implementation of his/her Settlement Plan.				
Describe how you will assist the applicant and accompanying family members (if applicable) with finding suitable housing.				

Describe how you will assist the applicant and accompany	nying family members (if ap	plicable) meet initial and daily nee	eds.
Describe how you will connect the applicant with settler	ment services offered in Ma	anitoba.	
(For information about settlement services offered in Ma	anitoba visit immigrateman	itoba.com: Arrive & Settle.)	
5. History of previous support			
Have you or someone else in your household previousl	ly supported a relative/frien	d under the MPNP?	
Yes No			
If yes, please provide details.			
Name:			
Result of application:			
Date landed in Canada:			
Current address and phone number:			
Street, city/town, postal code	E-mail	Phone	

Name	·		
Result	of application:		
Date la	anded in Canada:		
Currer	nt address and phone number:		
Street, o	city/town, postal code	E-mail	Phone
Name	:		
Result	of application:		
Date la	anded in Canada:		
Currer	nt address and phone number:		
Street, o	city/town, postal code	E-mail	Phone
6. De	claration and Authorization		
I hereb	by declare that:		
	I am a Canadian citizen or permanent resident of Car continuously residing in this province for at least one I am a close relative of the applicant or his/her spous	year.	
٠.	relative.	or mare included processing re-	autoriomp to my oroso
C.	I clearly understand that the applicant made a formal will not knowingly support the application of individua that I will be prohibited from supporting other relatives dependents do not settle successfully and permanen	ls who do not intend to live in Ma s or friends in the future if the app	nitoba, and I understand
d.	I am satisfied that the applicant has the ability to mee food, clothing and other goods and services necessa dependants, if applicable.	ry for daily living in Manitoba, for	
e.	I have not received or been promised payment or any		
f.	I understand that the provision of any false statement limited to, refusal to approve this or any future suppo- of Nomination, or any other enforcement action.		
g.	I understand that the Government of Manitoba may c	ontact me directly for any matter	related to this application.
h.	I agree to the release to the applicant of this Settleme	ent Plan - Part 2 and all supporti	ng documents.
i.	The information provided by me is true, complete and		
j.	I understand and am prepared to comply with all the Plan, and I have asked for and received explanation		
k.	I swear/affirm this commitment to be bona fide.		
Addre	ss:		
Date:			
Full na	ame:		
Signat	ture:		

## 7. Submit form

Submit your completed and signed Settlement Plan - Part 2 and supporting documents to the MPNP. Scan and send by e-mail. Or, drop off or mail your printed copy to the MPNP office within 30 days of receiving the e-mail from the MPNP.

Manitoba Provincial Nominee Program Manitoba Labour and Immigration 7th Floor – 213 Notre Dame Ave. Winnipeg, MB R3B 1N3

E-mail: mpnpsupporter@gov.mb.ca

You must include the following supporting documents:

- proof of your Canadian citizenship or permanent resident status (copy of your citizenship card, permanent resident card or Canadian passport)
- proof of Manitoba residence for at least one year (copies of both sides of your Manitoba Health Card)
- proof of relationship to the applicant (copies of birth and marriage certificates demonstrating close relationship)

nis page if you re	equire extra space	e to answer que	estions.		