Skilled Worker – Family Support Form

New Brunswick Provincial Nominee Program



To be completed by the Applicant and the Family Supporter living in New Brunswick.

Do not provide information	APPLICANT INFORM for your immigration represe		awyer in this section
			Male Female
Applicant Name (Last, First, Mi	ddle)		
Date of Birth (dd,mm,yyyy)	Country of Citizens	ship Passp	oort No.
Current residential address , in	ncluding postal code (Do not use	e a third party address)	
()	()		
Telephone (Daytime)	Telephone (Evening)	Email	
Exact Relationship to Supporte	r	Length of Time You Hav	e Known the Supporter
Describe How You Met the Sup	porter		
	FAMILY SUPPORTER INF	FORMATION	
			Male Female
Supporter Name (Last, First, M	iddle)		
Date of Birth (dd,mm,yyyy)	Status in Canada	S	tatus Since (mm,yyyy)
Current residential address , in	ncluding postal code (Please do	not use a third party add	ress)
()	()		
Telephone (daytime) T	elephone (evening)	Email	
Current Occupation	Start Date	Super	visor
Name of Business			
Current business address . inc	luding postal code (Do not use	a third party address)	

Family Supporter Declaration New Brunswick Provincial Nominee Program



Γh	is form must be completed by the Fa	mily Supporter.	
P	rincipal Applicant – Print Your Full N	ame	Date of Birth (dd/mm/yy)
oc	SOLEMNLY DECLARE THAT:		
1.	I am a Canadian citizen or Perma	nent Resident of Canada, residing full-	time in New Brunswick.
2.	immigration application was received	at least 12 consecutive months as of the ved at the New Brunswick Provincial National Norovincial Nominee Program application	ominee Program Office and
3.		al applicant or his/her spouse or comm ntation proving that I am a close relative	
	Complete name of my relative wh	o is applying to the New Brunswick Pro	ovincial Nominee Program
	Complete address of my relative	who is applying to the New Brunswick	Provincial Nominee Program
	Describe your exact relationship sister's son" or my "spouse's sister	to this person. Be specific. For examper's daughter".	ole: "my spouse's brother" OR "my
1.	My spouse or common-law partned declaration.	er (if applicable) agrees with the terms a	and conditions contained in this
5. I clearly understand that applicants to the New Brunswick Provincial Nominee Program named I make a formal declaration of their intention to live and work in New Brunswick, that I will not know support the application of individuals who do not intend to live in New Brunswick, and that I will I prohibited from supporting other relatives in the future, if any of the applicants named on this de not settle permanently in New Brunswick.			swick, that I will not knowingly unswick, and that I will be
	Principal Applicant	Spouse/Common-law partner	
	Accompanying dependent	Accompanying dependent	Accompanying dependent
	Accompanying dependent	Accompanying dependent	Accompanying dependent

- 6. I am satisfied that the applicant has the required amount of \$10,000 for a principal applicant and \$2,000 for each accompanying family member, and am aware that any applicant who cannot provide evidence of sufficient settlement funds may be refused by the New Brunswick Provincial Nominee Program.
- 7. I am prepared to assist the applicant and his/her family to establish successfully in New Brunswick. (Attach a written Settlement Plan covering, minimally, arrangements for job search and employment, licensing or registration in trade or profession, accommodation, schools, banks, transportation, registration for Medicare and other government and community programs, religious or cultural facilities.)

Yes No	If "Yes", give details (attach additional page if required). Use additional page if necessary for other additional supported or sponsored relatives.

I have also supported or sponsored other relatives as immigrants to Canada.

Name (Last, First, Middle)	Date of Application (dd,mm,yyyy)	Name of Immigration Program
		()
Residential address, including postal code		Telephone (daytime)
Employer of the person I supp	orted or sponsored	Landing date

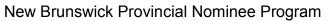
- 9. I have not received or been promised payment or other consideration for signing this support agreement.
- 10. The information provided is true, complete and accurate and give consent to the Province of New Brunswick to verify any information I have provided in this agreement.
- 11. I understand and am prepared to comply with all the commitments and obligations contained in this support agreement, having asked for and received an explanation on every point about which I may have been uncertain.
- 12. 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 agreement or future agreements
 - Refusal or withdrawal of the principal applicant's Certificate of Nomination
 - Other enforcement action
- 13. My Declaration cannot be terminated once the Province of New Brunswick has issued a Certificate of Nomination for the principal applicant and accompanying dependents.

- 14. I permit the sharing, release and exchange by and to the Government of New Brunswick 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 of this support agreement.
- 15. I agree to be the principal contact and representative for my relative in Canada. I understand that the Province of New Brunswick will contact me directly for all matters related to the entire application. No other representative will be contacted regarding this application.
- 16. I understand that the New Brunswick 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 New Brunswick.

I make this declaration knowing it to have the same force and effect as if made under Oath.

Signature of Supporter	Signature of Witness	
Signed at	Date (dd,mm,yyyy)	
Signature of Spouse/Common-law Partner of the Supporter	Signature of Witness	
Signed at	Date (dd,mm,yyyy)	

Settlement Plan





The Principal Applicant must complete this form. Please print clearly.

The New Brunswick Provincial Nominee Program is an immigration program for people who intend to live and work in New Brunswick. Provide at least three reasons for choosing New Brunswick as your destination in Canada
Name the city, town or region where you intend to live in New Brunswick. Provide at least three reasons why you have chosen this destination.
State your intended occupation, based on education and work experience. In different countries,
occupations with similar duties may have different names. To determine your occupation use the Working in

New Brunswick, Canada Tool.

If your occupation is regulated in New Brunswick, answer the following questions:			
2. 3.	What steps will you take to meet the requirements for working in this occupation in New Brunswick? Can you start the licensing process before you arrive in New Brunswick? In what non-regulated occupations could you find skilled employment in New Brunswick based on your training and work experience?		
If yc	our occupation is not regulated in New Brunswick, answer the following questions:		
1. 2.	What steps will you take before arriving in New Brunswick to ensure you find employment? What steps will to take after you arrive in New Brunswick to ensure you find employment? Can you upgrade your job skills before you arrive in New Brunswick?		

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Do you have sufficient English and/or French language skills to work in New Brunswick?
What are you doing to improve your language skills?
What will it and to releast a very and completely to New Down with O. Dowids a boundary of sade
What will it cost to relocate you, and your family, to New Brunswick? Provide a breakdown of costs.
What store is compared to a second of the se
What steps is your spouse or common-law partner taking to settle in New Brunswick?

Provide a list of other considerations in relocating to New Brunswick.		
DECLARATION OF APPLICANT		
I declare that the information I have given in this application is truthful, complete and correct.		
I understand all of the above information, having asked for and obtained an explanation on ev was not clear to me.	ery point which	
Principal Applicant – Sign and Print Your Full Name Date	e (dd/mm/yy)	