

New Brunswick Provincial Nominee Program (NBPNP)

You are required to submit this form within one (1) month after your arrival date in Canada with your Work Permit issued by Immigration, Refugees, Citizenship Canada (IRCC).

Principal Applicant (PA)							
Last Name	First Nar	ne, Middle Name	Date of Birth (mmm/dd/yyyy)				
Nationality	Title (Mr., Mrs., N	∕ls.)	INB#				
Declaration of Principal Applicant							
I,, do solemnly declare that the information I have given in the forgoing application is truthful, complete and correct, and I make this solemn declaration believing it to be true and knowing that it is of the same force and effect as if made under oath. I understand that any false statements or concealment of a material fact may result in my exclusion from the NBPNP. I will immediately inform the NBPNP if any of the information or the answers provide in my application forms change.							
Signature:	Date (mmm/dd/yyyy):						

Personal information on this form is collected under the authority of the *Immigration and Refugee Protection Act*, SC 2001 c.27. The purpose of the collection is to process your application for the New Brunswick Provincial Nominee Program (NBPNP). The information will be used for research, performance measurement and/or evaluation of the Program. If you have any questions about the collection and handling of personal information you may contact the Director of Immigration Services, Government of New Brunswick, Place 2000, 250 King Street, Fredericton, New Brunswick, Canada, E3B 9M9.

Telephone: (506)453-3981; Email: <u>bis-vie@gnb.ca;</u> Website: <u>www.welcomenb.ca.</u>

A. Your Residential Address in New Brunswick							
Apt / Unit #	Street # and Name		City / Town in NB		Post Code		
Home Phone #		Mobile Phone #		Email Address			
Name of Your Representative (who helped your settlement)							

B. Family Members and Landing Information								
	Last Name	First Name, Middle Name	Relationship to PA	Date of Birth (mm/dd/yyyy)	Canada			
1			PA					
2								
3								
4								
5								
6								
7								
8								

If you have any family members included in your application, but do not live with you, please complete the Section C below.

C.	First Name, Middle Name	Relationship to PA	Date of Birth (mm/dd/yyyy)	Apt / Unit #	Street # and Name	Province, Country	Post Code
1							
2							
3							
4							
5							
6							
7							

Please submit this form to <u>bis-vie@gnb.ca</u>, attach the following in the email:

- a. Copy of Port of Entry of each family member.
- b. Copy of your Work Permit issued by IRCC.

Reminder of Important Timelines after your arrival in your Business Performance Agreement:

- 1. Within 1 month Report of Arrival in Canada.
- 2. Within 9 months Report of Business Opening.
- 3. Within 12 consecutive months of business operation Request for Nomination.
- 4. Site visits to your business may conduct any time.