

Use of a Representative

The applicant of an immigration application with Immigration New Brunswick (ImmigrationNB) must use this form to

- appoint a third party as a representative;
- update the contact details of the current representative;
- cancel the current representative's appointment; or
- appoint a new representative and cancel the current one.

Dependent children over the age of 18 must complete their own form to authorize the same representative to conduct business with ImmigrationNB on their behalf.

Section 1: Applicant's identity and request

Provide information about your identity, as well as what you are requesting.

Family name as shown on passport

Given names as shown on passport

Date of birth (yyyy-mm-dd)

Passport number

INB candidate number

I am

- ☐ appointing a representative. See sections 2, 3, 4, and 6.
- ☐ updating my representative's contact information. See sections 2, 3, 4, and 6.
- ☐ cancelling the appointment of a representative. See sections 5 and 6.

Section 2: Type of representative

There are two types of representatives: paid and unpaid. Only authorized representatives can receive money or any other form of compensation in exchange for their service. For more information about paid representatives, visit the ["Using a representative"](#) webpage.

Unpaid representative

My representative is unpaid and is

- ☐ a family member or friend
- ☐ a member of a non-governmental or religious organization
- ☐ the constituency office of my provincial MLA or federal MP
- ☐ a prospective or current employer
- ☐ an employment agency
- ☐ _____

Paid representative

My representative is paid and is a member in good standing of one of the following regulatory bodies:

- ☐ The College of Immigration and Citizenship Consultants (CICC)
College ID _____
- ☐ A Canadian provincial or territorial law society
Province or territory _____
Membership ID number _____
- ☐ The Chambre des notaires du Québec
Membership ID number _____

Section 3: Appointment of a representative

I appoint the individual named below to represent myself and conduct business with ImmigrationNB on my behalf.

I authorize this individual to have access to information in my application submitted to ImmigrationNB, including that of my spouse or common-law partner and dependent children under 18 years of age.

I am aware that any information subject to exemption, if I have the right of access under the *Right to Information and Protection of Privacy Act*, will likely not be shared with my representative named below.

Firm or organization's name

Representative's family name	Representative's given names
<hr/>	<hr/>

Supervising lawyer

If your representative is a student at law, provide details of the supervising lawyer as well.

Family name	Given names	Membership ID
<hr/>	<hr/>	<hr/>

Mailing address

PO Box	Unit	Street no.	Street name
<hr/>	<hr/>	<hr/>	<hr/>

City or town	Province or territory	Postal code
<hr/>	<hr/>	<hr/>

Email address	Telephone number	Website
<hr/>	<hr/>	<hr/>

By indicating an email address above, you authorize ImmigrationNB to send to this email address application-related correspondence, including your documents and personal information.

An authorized paid representative also receives correspondence via their INB account once appointed.

Section 4: Representative's declaration

I declare that the information in sections 2 and 3 is truthful, complete, and correct. I understand and accept that I am the person appointed by the applicant named in Section 1 to conduct business on the applicant's behalf with ImmigrationNB.

Representative's signature	Date (yyyy-mm-dd)
<hr/>	<hr/>

Section 5: Cancelling the appointed representative

I withdraw my authorization for the individual named below to serve as my representative, receive information on my case file, and conduct business on my behalf with ImmigrationNB.

Representative's family name

Representative's given names

Section 6: Applicants' solemn declaration

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 New Brunswick's immigration programs. I understand the above information having had the opportunity to ask for, or having asked for, and obtained an explanation for every point that was not clear to me. I will immediately inform Immigration New Brunswick if any information or answers provided in my application change.

Principal applicant's signature

Date (yyyy-mm-dd)

Spouse's or common-law partner's signature

Date (yyyy-mm-dd)

Section 7: Information collection

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 under New Brunswick's immigration programs. The information will be used for research, performance measurement and/or evaluation of the programs. If you have any questions about the collection and handling of personal information please visit: <https://www.gnb.ca/en/gov/information-access-privacy.html>.