



# Self-Employed Farmer Application (AINP 004)

AINP Self-Employed Farmer Stream

The personal information collected through the Alberta Immigrant Nominee Program (AINP) is collected for purpose of administering the AINP. This personal information collection is authorized by section 33(c) of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of personal information, you may contact AINP Operations Manager at 825-468-4213, by email at [lbr.pnpoffice@gov.ab.ca](mailto:lbr.pnpoffice@gov.ab.ca) or by mail to Alberta Immigrant Nominee Program, Suite 940, ATB Place North Tower, 10025 Jasper Avenue, Edmonton, Alberta, Canada, T5J 1S6. If you have any questions about this program, please contact the AINP through the Employer Support Services at [entrepreneur.supportservice@gov.ab.ca](mailto:entrepreneur.supportservice@gov.ab.ca).

## A. Introduction

File number (office use):

Information on eligibility and how to apply to this stream is available on the AINP website at:

[Alberta.ca/ainp-self-employed-farmer-stream-apply.aspx](http://Alberta.ca/ainp-self-employed-farmer-stream-apply.aspx).

Prepare your application, gather all supporting documents and send by registered mail or courier to:  
Self-Employed Farmer Stream, Alberta Immigrant Nominee Program, Government of Alberta, Suite 940, ATB Place North Tower, 10025 Jasper Avenue, Edmonton, AB Canada T5J 1S6.

## B. Candidate's Personal Information

Candidate's family name:	Candidate's given name(s):	Candidate's gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
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Candidate's residential address:

City/Town:	Prov/Terr/State:	Postal code/Zip code:	Country:
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Candidate's mailing address: (if different from above)

City/Town:	Prov/Terr/State:	Postal code/Zip code:	Country:
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Candidate's home phone:	Candidate's cell phone:	Candidate's work phone:	Candidate's fax:
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Candidate's email:	Candidate's date of birth: (yyyy/mm/dd)	Candidate's place of birth: (city or town)
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Candidate's country of citizenship:	Candidate's country of birth:	Candidate's intended province/territory of residence in Canada:
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## C. Language Proficiency

Total years of education:

Level of education successfully completed: (check all that apply)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Doctorate / PhD   | <input type="checkbox"/> Diploma (2 years)                  | <input type="checkbox"/> Secondary school    |
| <input type="checkbox"/> Master's degree   | <input type="checkbox"/> Certificate (1 year)               | <input type="checkbox"/> No formal education |
| <input type="checkbox"/> Bachelor's degree | <input type="checkbox"/> Trade Certification/Apprenticeship | <input type="checkbox"/> Other: _____        |

Language Proficiency:

Language of communication:  English  French

Native language:

Language assessment type:

Test date: (yyyy/mm/dd)

Test scores:

Listening: \_\_\_\_\_ Reading: \_\_\_\_\_ Writing: \_\_\_\_\_ Speaking: \_\_\_\_\_

## D. Immigration, Refugees and Citizenship Canada (IRCC) Application History

Have you, or any of your accompanying dependents, previously submitted an Application for Permanent Residence in Canada to Immigration, Refugees and Citizenship Canada (IRCC)?  Yes  No

If yes, please indicate how many previous applications have been submitted:

If yes, please provide a response to each of the following:

IRCC (Visa Office) to which application was submitted:	IRCC file number:	Date application submitted (yyyy/mm/dd)
Status of application:	Principal applicant:	Intended province of residence:

Have you ever had an application for Permanent Residence in Canada refused?  Yes  No

If yes, please provide a brief description of the reasons for the refusal:

**Provide a photocopy of any correspondence with IRCC regarding the previous application(s).**

## E. Family Members

List all dependents who intend to accompany you to Canada: (do not include Canadian citizens or permanent residents)

	Family name	Given name	Date of birth (yyyy/mm/dd)	Gender
Spouse or common-law partner				<input type="checkbox"/> Male <input type="checkbox"/> Female
Dependent				<input type="checkbox"/> Male <input type="checkbox"/> Female
Dependent				<input type="checkbox"/> Male <input type="checkbox"/> Female
Dependent				<input type="checkbox"/> Male <input type="checkbox"/> Female

Use an additional page for more dependents if required

## F. Candidate's Spouse/Common-Law Partner's Occupation and Education

Family name:

Given name(s):

Current job title:

### Education history

Total years of education:

Level of education successfully completed: (check all that apply)

Doctorate / PhD

Diploma (2 years)

Secondary school

Master's degree

Certificate (1 year)

No formal education

Bachelor's degree

Trade Certification/Apprenticeship

Other: \_\_\_\_\_

## G. Farming History

Type of current farm:

Description of primary production/secondary production (e.g. crops, livestock) of your existing farm:

Type of ownership of your existing farm: (e.g. partnership, sole proprietor)

Please indicate the location and size of your existing farm:

Number of years your existing farm has been in operation:

Has your existing farm business been sold?  Yes  No

Has your farm business been advertised for sale?  Yes  No

What is your planned/anticipated date of immigration? (yyyy/mm/dd)

Briefly explain your past responsibilities and experience in farm management: (attach a separate page if required)

Have you undertaken any leadership roles in farm organizations or associations?  Yes  No

If yes, please describe: (attach a separate page if required)

Briefly explain your past responsibilities and experience in non-farm activities, other training or careers prior to farming: (attach a separate page if required)

What was your farm's net income for the past 5 years (in Canadian dollars)?

Year 1	Year 2	Year 3	Year 4	Year 5

## H. Exploration

What steps have you undertaken to research the Alberta/Canadian farming environment and opportunities? In your response, you may want to consider the following: Exploratory visits to Alberta, including the length and dates of your visit(s), discussions with government officials, realtors, producer organizations, industry representatives, Alberta farmers in the same production sector, financial institutions, etc. regarding the development of your investment proposal, and any observations or conclusions you came to as a result of your visit (attach a separate page).

## I. Alberta Farm Investment Proposal

Proposed type of ownership:

If sole proprietorship, please indicate the date you became or will become the registered owner of the operation:

If partnership, identify partner and their percentage of ownership. Also identify those partners who are not Canadian citizens or permanent residents: (This is a requirement of the Alberta Foreign Land Ownership Act Regulation)

Partner:

Percentage of shareholding:

Non-Canadian/permanent resident partner(s):

Percentage of shareholding:

If limited company, identify directors and their percentage of shareholding. Also identify those shareholders who are not Canadian citizens or permanent residents: (This is a requirement of the Foreign Land Ownership Act Regulation)

Directors:

Percentage of shareholding:

Non-Canadian/permanent resident director(s):

Percentage of shareholding:

Have you ever been involved in a business failure, receivership or bankruptcy?  Yes  No

If yes, when? Date:

## J. Proposed Alberta Farm Enterprise

Please describe the farm that you intend to operate (e.g. number of acres, livestock, crop production, estimated annual net income after expenses). Also describe any proposed venture/business arrangements you have established with a production company or agri-food processor. (e.g. pig production, potato production, pig packer supply contract, etc.) To assess viability of the proposed venture, the business plan will be reviewed by officials of Alberta Agriculture and Forestry. (please attach your business plan to this application)

Have you made an offer to purchase a farm or land in Alberta? If so, please provide details:

Do you plan to expand and diversify your operation in Alberta over the next 3-5 years? Please describe your plans and the investment that you plan to make: (attach a separate page if required)

## K. Financial Information

### Personal net worth statement

A complete and current statement of your total personal net worth is required. All assets and liabilities must be identified. However, do not include personal items such as jewelry, furniture, etc., as the ownership of such items is difficult to verify.

All assets listed must be your own personal holdings and must be documented. The sources of any funds or assets in your possession for less than one year must be identified.

You may be asked to present financial documents to support the information provided in this statement.

### Assets

#### Bank deposits (Foreign/Canadian)

##### CURRENT AND SAVINGS ACCOUNTS (Specify currency)

Date opened	Account number	Current balance
(yyyy/mm/dd)		
(yyyy/mm/dd)		
(yyyy/mm/dd)		
(yyyy/mm/dd)		
(yyyy/mm/dd)		
TOTAL CDN		\$

##### FIXED DEPOSITS (Specify currency)

Date of initial deposit	Maturity date	Current balance
(yyyy/mm/dd)	(yyyy/mm/dd)	
(yyyy/mm/dd)	(yyyy/mm/dd)	
(yyyy/mm/dd)	(yyyy/mm/dd)	
(yyyy/mm/dd)	(yyyy/mm/dd)	
(yyyy/mm/dd)	(yyyy/mm/dd)	
TOTAL CDN		\$

### Property

Complete address	Year Purchased	Mortgaged	Purchase price	Estimated current market value (specify currency)
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
TOTAL CDN			\$	\$

Publicly traded stocks and other passive investments (Attach a separate sheet if required)

Description	Quantity	Estimated current market value (specify currency)
TOTAL CDN		\$

Business assets

Name	Percentage owned	Current book value (net assets)	Estimated current market value (specify currency)
TOTAL CDN			\$

Other assets (Attach separate sheet if required)

Description	Amount (specify currency)	
TOTAL CDN		\$

**L. Liabilities**

Mortgages

Name	Percentage owned	Current book value (net assets)	Estimated current market value (specify currency)
TOTAL CDN			\$

Personal debts

Nature of obligation	Amount (specify currency)	
TOTAL CDN		\$

Other liabilities (e.g. deferred taxes, etc.)	
Nature of obligation	Amount (specify currency)
TOTAL CDN	\$

### M. Total Personal Net Worth

Net worth statement	
Total assets	CDN\$
minus Total liabilities	CDN\$
Net worth CDN	\$

### N. Other Financial Information

Funds in my possession on my arrival in Canada	CDN\$
Funds to transfer to Canada at a later date	CDN\$
Funds already in Canada	CDN\$
Funds or equity remaining abroad	CDN\$
Exchange rate used: CDN\$ 1=	TOTAL CDN \$

### O. Contact Information

Canadian bank:

Contact:	Telephone number:
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Foreign bank:

Contact:	Telephone number:
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### P. Program Evaluation

AINP will be contacting you in the future for follow-up. Please provide the name of an additional contact person, preferably in Canada, who we may contact if we cannot reach you. **Do not list your authorized representative or your employer.**

Family name:	Given name(s):
Phone number of contact person:	Email of contact person:

## Q. Declaration and Authorization of Candidate

By signing and submitting this form, I confirm that:

1. The information I have provided in this application is true, complete and correct and I, the candidate, have personally provided it.
2. I understand that:
  - a. The availability of AINP streams and categories is dependent on application volumes and labour market needs. AINP streams and categories may be closed or suspended without prior notice. The AINP reserves the right to close application intake for any AINP stream or category at any time, without prior notice. Further, the AINP may decline to consider applications to closed or suspended streams or categories, regardless of when the applications were submitted. The criteria for the AINP are routinely evaluated and may be subject to change at any time and without notice. Changes to the AINP, including notice of suspension or closure of its streams and categories and criteria changes, are available at [Alberta.ca/AINP.aspx](http://Alberta.ca/AINP.aspx)
  - b. The AINP is not obligated to assess/process any applications submitted. Applications to the AINP are treated as an expression of interest, and as such, will be processed according to quality of the application (completeness, eligibility), labour market information, occupational supply and demand forecasting, AINP application volumes, and / or any other factors at the AINP'S discretion. By submitting an application to the AINP I acknowledge and agree that my application may not be processed in the order received, or at all. Further, the decision to assess / process any particular application, and the outcome of any such assessment / processing, is at the AINP'S sole discretion. The AINP may choose to assess applications with the most current criteria irrespective of the date of submission of an application. Program criteria are eligibility minimums, and meeting program criteria does not guarantee that my application will be assessed, processed, or granted. Applicants must have a strong likelihood of becoming economically established in Alberta and the AINP reserves the right to decline applications if the AINP is of the opinion that the applicant may not economically establish in Alberta.
3. I understand that submitting an Application for Permanent Residence in Canada to Immigration, Refugees and Citizenship Canada (IRCC) on the basis of an Alberta Immigrant Nominee Program (AINP) Nomination issued by the Government of Alberta, is subject to federal requirements. Specifically, my application for permanent residence is subject to the statutory requirements for admissibility under the Immigration and Refugee Protection Act and its Regulations, and the Nomination and application do not guarantee that I will be granted permanent residence in Canada.
4. I understand that the AINP may decline this application or withdraw a Nomination:
  - a. If I have submitted any false or misleading statements or information or concealed a relevant or significant fact (both of which constitute misrepresentation) and that I may be banned from the AINP for an unspecified period of time.
  - b. If I do not comply with any request for information required by the AINP to effectively administer and maintain the integrity of the program;
  - c. For reasons other than the above statements.  
As a result of this decline or withdrawal, the AINP may refuse to consider me as a Candidate for Nomination for an unspecified period.
5. I understand that I will be required to attend an interview, conducted by officials of the Government of Alberta, to assist in determining my eligibility as a Candidate under the AINP.
6. I understand all of the above statements, and have asked for and received an explanation, or language translation if required, on every point about which I may have been uncertain.

**Candidate Authorization** *Original signatures are required on the application in blue ink*

Candidate's name (print)	Signature (candidate)	Date signed (yyyy/mm/dd)
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## R. Authorizations to Collect and Disclose Personal Information

By signing and submitting this form:

1. I acknowledge that the AINP will disclose, as necessary, information collected from this application under the program, to officials in the Government of Alberta, including but not limited to partner ministries, and to officials administering immigration, temporary foreign worker or other programs related to permanent residence or temporary residence within the Government of Canada.
2. I acknowledge that the Government of Canada will disclose, as necessary, personal information about me collected under the Immigration and Refugee Protection Act and its Regulations to officials administering the AINP. I also acknowledge that the AINP will collect such information.
3. I acknowledge that the AINP will disclose information collected from this application under the program to other Canadian provincial and territorial immigration officials, and to collect information from other Canadian provincial and territorial immigration officials collected in applications under their programs, as necessary, for the purpose of assessing or verifying information, or in the event of any suspected non-compliance with any provincial or federal law.
4. I authorize the AINP to disclose to and collect personal information from other sources inside or outside Canada for the purpose of evaluating my eligibility for the AINP, verifying information provided in this application, maintaining program integrity and evaluating the effectiveness of the AINP. These sources may include, but are not limited to, current and former employers, professional organizations, industry associations, educational institutions, financial institutions, governments or their agencies and law enforcement agencies, and third party evaluators under contract with the AINP.
5. I confirm my understanding of all the previous statements, and have asked for and received an explanation, or language translation if required, of every point that was not clear to me.
6. I understand I will be contacted to complete brief questionnaires to evaluate the program and may be contacted to participate in future services provided by the Government of Alberta, should I become a nominee or permanent resident as an Alberta Provincial Nominee. Questionnaires to evaluate the program are required by Immigration, Refugees and Citizenship Canada (IRCC). I understand that a third party may be used to administer these questionnaires.

**Candidate Authorization** *Original signatures are required on the application in blue ink*

Candidate's name (print)	Signature (candidate)	Date signed (yyyy/mm/dd)
Spouse's or common-law partner's name (print)	Signature (spouse or common-law partner)	Date signed (yyyy/mm/dd)
Dependent's name, 18 years of age or older (print)	Signature (dependant)	Date signed (yyyy/mm/dd)
Dependent's name, 18 years of age or older (print)	Signature (dependant)	Date signed (yyyy/mm/dd)
Dependent's name, 18 years of age or older (print)	Signature (dependant)	Date signed (yyyy/mm/dd)

## S. AINP Policy on Use of Representatives

### **What is a representative?**

Representatives give immigration advice and help prepare immigration applications, including for the AINP. They can be paid or unpaid. Representatives include:

- immigration consultants
- lawyers, or
- other representatives (such family members, friends, non-profit groups and religious groups).

A person who is paid to give you immigration advice or to assist you in filling out your immigration applications must be authorized to act as a representative for the purposes of the AINP.

You do not need to use a representative to apply to the Alberta Immigrant Nominee Program (AINP). All the forms and information that you need to apply to immigrate to Alberta are available for free. If you follow the instructions online and in the application guide, you can complete the application on your own.

### **Representatives Authorized for the Purposes of the AINP**

The AINP will only conduct business with a representative who is authorized under this policy. Only the following persons are authorized to be representatives for the purposes of the AINP:

- a person who is not paid; or
- if paid, a member in good standing of a provincial law society, the Chambre des notaires du Québec, or the Immigration Consultants of Canada Regulatory Council (ICCRC).

No other person may be paid to provide immigration advice or to help prepare immigration applications. Any person not authorized to be a paid representative for the purposes of the AINP is an unauthorized representative and must either become authorized or refer you to someone who is.

Payment includes remuneration or compensation in any form, and can be a benefit other than money that is made now or in the future. Payment can be direct or indirect. Even if the person who provides immigration advice or assists with an AINP application is being paid or compensated by someone other than you (the Candidate), the person is still considered to be a paid representative.

### **Declaring the Use of a Representative**

On your application form, you must tell the AINP whether any person provided you with immigration advice or assisted you with your AINP application.

If a person did, they must provide their information to the AINP and sign a declaration. You may also authorize this person to conduct business on your behalf with officials of AINP.

If a person provided you with immigration advice or assisted you with your AINP application and you do not tell the AINP, this is considered to be false and misleading information and your application may be refused or your nomination may be withdrawn and you may be banned from the AINP for an unspecified period of time.

If you decide to use a representative for your AINP application, understand that:

- Your AINP application will not be given special attention or guaranteed approval if you use an immigration consultant or lawyer or other representative.
- The AINP cannot guarantee the accuracy of interpretations by other persons.
- You should never follow advice to use false documents or make false statements on your AINP forms. This will result in your application being declined or your nomination withdrawn and you may be banned from the AINP for an unspecified period of time.

### **Other important information about using a representative**

To confirm an immigration consultant is a member in good standing, you can check the person's status on the Immigration Consultants of Canada Regulatory Council (ICCRC) website using the Find an Immigration Consultant link at [icrc-crcic.info/find-a-professional/](https://icrc-crcic.info/find-a-professional/) before using their services.

To confirm a lawyer is a member in good standing, you can check a lawyer's practice status on the website for the law society of the province in which the lawyer is practicing before using their services. A list with links to Canada's 14 provincial and territorial law societies (including the Chambre des notaires du Québec) is available on the Federation of Law Societies of Canada website at [flsc.ca/about-us/our-members-canadas-law-societies/](http://flsc.ca/about-us/our-members-canadas-law-societies/).

You can look up the lawyer in the lawyer directory on each provincial/territorial law society website (usually found in a section "for the public") and get information on the lawyer's current practicing status with the society.

If you have a complaint about unprofessional conduct by immigration consultants you may contact the Immigration Consultants of Canada Regulatory Council (ICCRC).

If you have a complaint about unprofessional conduct by a lawyer, you may contact the provincial/territorial law society where you received services. For information on reporting a complaint about an unauthorized representative see the Immigration, Refugees and Citizenship Canada (IRCC) website at [canada.ca/en/immigration-refugees-citizenship/services/immigration-citizenship-representative/file-complaint-against-representative.html](http://canada.ca/en/immigration-refugees-citizenship/services/immigration-citizenship-representative/file-complaint-against-representative.html).

For more tips on choosing a representative, visit the IRCC website at [canada.ca/en/immigration-refugees-citizenship/services/immigration-citizenship-representative/choose.html](http://canada.ca/en/immigration-refugees-citizenship/services/immigration-citizenship-representative/choose.html).

There are internet scams and false websites. The official Government of Alberta website is [www.alberta.ca](http://www.alberta.ca). The official Government of Canada immigration website is [canada.ca/en/services/immigration-citizenship.html](http://canada.ca/en/services/immigration-citizenship.html). Other websites may appear to be official government websites, but the information they contain may be inaccurate or out of date

## T. Declaration of Assistance with AINP Application

1. Has anyone provided you with immigration advice or assisted you in preparing your AINP application?  Yes  No  
**If "No," no one provided assistance in preparing your application, you must sign the declaration below and your application is complete:**

Declaration of Candidate:

1. I declare that I completed application on own with no immigration advice or assistance in preparing my AINP application from any person/organization and have not appointed a representative to act on my behalf with the AINP.
2. I understand that if a person provided me with immigration advice or assisted with my AINP application and I did not tell the AINP, this is considered to be false and misleading information and my application may be refused or my nomination may be withdrawn and I may be banned from the AINP for an unspecified period of time.

Signature (Original signatures are required on this form in blue ink)

Date signed (yyyy/mm/dd)

**If "Yes," you received assistance in preparing your application, answer the following question:**

Did the person receive any pay for providing immigration advice and/or assisting you in preparing your AINP application?

Yes  No

- Pay includes remuneration or compensation in any form, and can be a benefit other than money that is made now or in the future.
- Pay can be direct or indirect. Even if the individual who provides immigration advice or assists with an AINP application is being paid or compensated by someone other than you (the Candidate), this individual is still considered to be a compensated representative.
- A person who is paid to assist with an AINP application must be a member in good standing of a provincial law society, the Chambre des notaires du Québec, or the Immigration Consultants of Canada Regulatory Council (ICCRC).

If “No,” the representative assisting you did not receive pay, the AINP considers this person to be an unpaid representative. You must provide information about this individual to the AINP: You and your representative must also sign the declarations below and you must indicate if you authorize the representative to act on your behalf for your AINP application.

Country		
Representative's surname	Representative's given name(s)	
Relationship to you	Other	
Suite number	Mailing address	Country
City / Town	Province/Territory/State	Postal / Zip code
Email	Daytime phone	

Declaration of candidate:

I declare I did not pay or compensate, or have knowledge of payment or compensation by someone other than myself to \_\_\_\_\_, to provide immigration advice or assist with the preparation of my AINP application.

Signature (Original signatures are required on this form in blue ink)	Date signed (yyyy/mm/dd)
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I declare I did not receive any payment or compensation, and that I will not, at any time in the future, accept any such fee, remuneration or reward in connection with this application.

Unpaid representative's signature (Original signatures are required on this form in blue ink)	Date signed (yyyy/mm/dd)
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Do you authorize the person identified above to conduct business on your behalf with officials of the Alberta Immigrant Nominee Program (AINP)?  Yes  No

If “Yes,” you and your representative must fill out Sections U and V. If “No” your application is complete.

If **“Yes”** the representative assisting you received compensation, the AINP considers this person to be an paid representative. You must provide information about this individual to the AINP. You must also indicate if you authorize the representative to act on your behalf for your AINP application.

Representative's surname		Representative's given name(s)		Firm name	
Type of Representative (Lawyer / Immigration Consultant / Other)					
Canadian provincial or territorial law society [if lawyer selected]			ICCRC number: [if immigration consultant selected]		
Position					
Suite number	Mailing address			Country	
City / Town		Province/Territory/State		Postal / Zip code	
Email			Daytime phone		Fax number

Do you authorize the person identified above to conduct business on your behalf with officials of the Alberta Immigrant Nominee Program (AINP)?  Yes  No

If **“Yes,”** you and your representative must fill out Sections U and V. If **“No”** your application is complete.

## U. Declaration and Authorization of Candidate, Spouse/Common-Law Partner and Dependants 18 Years or Older

By signing and submitting this form, I confirm that:

1. I authorize the person identified above to serve as my representative and to conduct business on my behalf with officials of the Alberta Immigrant Nominee Program (AINP).
2. I am aware that applying to the AINP is free, and that a representative acts as an independent agent, and does not represent in any way the Government of Alberta or any of its departments, including the AINP.
3. I am aware that, in Alberta, the employer is responsible for any fees associated with the recruitment of workers; that individuals cannot be charged for recruitment services.
4. I acknowledge that the AINP will only conduct business with a representative who is unpaid or who is a member in good standing of a provincial law society, the Chambre des notaires du Québec, or the Immigration Consultants of Canada Regulatory Council (ICCRC), and that if the representative is not a member in good standing with any of these organizations that the application may be returned or declined by the AINP.
5. I authorize my representative to provide this application and attachments to the AINP.
6. I authorize my representative and the AINP to discuss the contents of this application and attachments and correspond with each other for the purposes described in this form.
7. I acknowledge that the AINP reserves the right to contact the candidate directly regarding this application, regardless of the use of a representative.
8. I acknowledge that if I received immigration advice or assistance in applying to the AINP and did not disclose the name of the person who provided me with advice or assistance, this is considered to be false and misleading information this application may be refused or a nomination issued under this application may be withdrawn and I may be banned from the AINP for an unspecified period of time.
9. I declare that I have read the AINP Policy on Representatives and have complied with it.
10. I confirm that I understand all previous statements, and that I have asked for and received an explanation, or a language translation if required, on every point about which I may have been uncertain.

**Candidate Declaration:**

By signing below, you agree to all points identified in the Declaration and Authorization of Candidate, Spouse/ Common-Law Partner and Dependents 18 Years or Older section above.

Original signatures are required on this form in **blue** ink

Candidate's name (print)	Signature (candidate)	Date signed (yyyy/mm/dd)
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**Spouse or Common-Law Partner Declaration:**

By signing below, you agree to all points identified in the Declaration and Authorization of Candidate, Spouse/Common-Law Partner and Dependents 18 Years or Older section above.

Original signatures are required on this form in **blue** ink

Spouse's or common-law partner's name (print)	Signature (spouse or common-law partner)	Date signed (yyyy/mm/dd)
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**Dependant's name, 18 years of age or older:**

By signing below, you agree to all points identified in the Declaration and Authorization of Candidate, Spouse/ Common-Law Partner and Dependents 18 Years or Older section above.

Original signatures are required on this form in **blue** ink

Dependent's name, 18 years of age or older (print)	Signature (dependant)	Date signed (yyyy/mm/dd)
Dependent's name, 18 years of age or older (print)	Signature (dependant)	Date signed (yyyy/mm/dd)
Dependent's name, 18 years of age or older (print)	Signature (dependant)	Date signed (yyyy/mm/dd)

## V. Declaration of Representative

By signing and submitting this form, I confirm that I am the Candidate's, spouse's/common-law partner's and/or dependant's authorized representative, and that:

1. I explained, translated, or obtained a translation of all points that were unclear to the candidate on this application.
2. I acknowledge and accept that I am the person appointed by the candidate to conduct business with officials of the AINP.
3. I acknowledge that this authorization is made in accordance with Section 84 of the Freedom of Information and Protection of Privacy (FOIP) Act.
4. I acknowledge that the candidate, spouse/common-law partner and/or dependant may be contacted directly by officials of the AINP.
5. I have clearly indicated at all times and in all materials that I act as an independent agent, and that I do not represent in any way the Government of Alberta or any of its departments, including the AINP.
6. I advised the candidate that applying to the AINP does not require them to use a representative, prior to their signing a contract with me or my firm.
7. I advised the candidate that they are free to communicate directly with the AINP on their own even while represented by me.
8. The information and documents I have provided for this application are, to the best of my knowledge, truthful, complete, and correct.
9. I advised the candidate of the requirement that applicants under the AINP have a bona fide intent to reside and work or do business in Alberta.
10. I will be truthful in all forms of communication and media and will refrain from misleading statements, exaggerations or innuendo.

11. I have advised the candidate that there is no preferential treatment given to representatives by the AINP, Alberta Labour, and that the Government of Alberta has no special arrangement or relationship with representatives, that would guarantee acceptance or faster processing of an application made to the AINP by using a representative.
12. I will relay any correspondence received from the AINP, Alberta Labour about the candidate's file directly to the candidate without modification or undue delay, and I will provide the candidate with complete and accurate information regarding the AINP and immigration matters.
13. I will act responsibly, with due diligence and in a timely manner for the candidate.
14. I will not engage in any unlawful activity personally or on behalf of the candidate.
15. I will not act for a candidate until all charges, fees and services have been fully disclosed to the candidate and are fair, reasonable and agreed upon without duress and in accordance with the Fair Trading Act of Alberta.
16. I acknowledge that I must be an unpaid representative or a paid representative who is a member in good standing of a provincial law society, the Chambre des notaires du Québec, or the Immigration Consultants of Canada Regulatory Council (ICCRC), and that if I am not a member in good standing with any of these organizations that the application may be returned or declined by the AINP.
17. I declare that I have read the AINP Policy on Representatives and I am an unpaid representative or a paid representative who is a member in good standing of a provincial law society, the Chambre des notaires du Québec, or the Immigration Consultants of Canada Regulatory Council (ICCRC).
18. I understand that if the AINP is of the opinion that I am an unauthorized representative and I received pay for giving immigration advice or providing assistance on an AINP application, I may be banned from acting as a representative on AINP applications for an unspecified period of time and may be subject to consequences under the Immigration and Refugee Protection Act (IRPA), Fair Trading Act of Alberta, and discipline from federal/provincial territorial regulators.
19. I acknowledge that the AINP may disclose to and collect from appropriate bodies including any professional regulatory body to which I belong, federal immigration authorities or law enforcement, information about any suspected instance of professional misconduct on my part, and information to administer the program, maintain program integrity and determine if I have complied with the AINP policy on representatives. I understand that the AINP reserves the right to refuse to deal with any representative who provides false or misleading information or conceals relevant information, or who is not in compliance with the AINP criteria for representatives.

If you are a member in good standing of a provincial law society, by signing below, you agree to adhere to points 1 through 11 and 16 through 19 identified in the Declaration of Representative section above. For lawyers in good standing with their provincial law societies, their respective Codes of Conduct provide equivalent obligations to points 12 through

Original signatures are required on this form in **blue** ink

Lawyer's signature	Date signed (yyyy/mm/dd)
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Original signatures are required on this form in **blue** ink

Representative's signature	Date signed (yyyy/mm/dd)
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