USE OF A REPRESENTATIVE

You do not need to hire a representative, it is your choice. No one can guarantee the approval of your application. All the forms and information that you need to apply are available for free at www.cic.gc.ca.

A representative is someone who has provided advice or guidance to you at any stage of the application process, whether that person received consideration (i.e. compensation) or not. Following the submission of your application, that person may conduct business on your behalf with Citizenship and Immigration Canada (CIC) and the Canada Border Services Agency (CBSA) if you appoint them as your representative by filling out this form. The preceding includes Express Entry submissions. You may have **one** representative only per application. If you appoint an additional representative, the previous representative will no longer be authorized to conduct business on your behalf and receive information on your case file.

Note: You must use this form to appoint a paid or unpaid representative to conduct business with CIC or the CBSA on your behalf. You must also use this form to: 1. notify CIC if your representative's contact information changes, 2. if you wish to cancel the appointment of your current representative and represent yourself, or, 3. if you wish to cancel the appointment of your current representative and appoint a new representative

	appointing a representative. Complete S	presentative. Complete Sections A, B and D.					
	cancelling the appointment of a represen	tative. Complete Section A, C and D.					
SEC	TION A: APPLICANT INFORMATION						
1.	Your full name						
	Family name (Surname)	MURUGANANDAM					
	Given name(s)	VIGNESWARAN					
2.	Your date of birth	(YYYY-MM-DD) 1990-06-05					
3.	If you have already submitted your application:						
	Name of office where the application was submitted						
	Type of application (permanent residence, extension of study permit, citizenship, etc.)						
4.	Your Citizenship and Immigration Canada Identification nu	mber (if known)					
	Client Identification (ID) or Unique Client Identifier (UCI) number						
SEC	TION B: APPOINTMENT OF REPRESENTATIVE						
	Services Agency. Note: Even if a representative is being compensated representative. I authorize Citizenship and Immigration Canada and Carab years of age to my representative. This authorization	entative and to conduct business on my behalf with Citizens g paid or compensated by someone other than you (the appli mada Border Services Agency to release information from my is in accordance with the <i>Privacy Act</i> . to exemption, if I had the right of access under the <i>Privacy A</i>	cant), the representative is still considered to be a				
5.	Your representative's full name Family name (Surname)	MacDonald					
	Given name(s)	Kathryn Mary					
6.	Your representative: (choose one)						
	is UNCOMPENSATED and is a:						
	family member or friend						
	member of a non-governmental or religious orga	anization					
	member of the Immigration Consultants of Canada Regulatory Council (ICCRC), a Canadian provincial or territorial law society, or the <i>Chambre des notaires</i> du Québec						
	other						
	is or will be COMPENSATED and is a member in good standing of:						
	the Immigration Consultants of Canada Regulat	ory Council (ICCRC)					
	Membership ID number	R414887					
	a Canadian provincial or territorial law society						
	Which province or territory?						
	Membership ID number						
	the Chambre des notaires du Québec						
	Membership ID number						

Name of firm or organization							
North American							
If student-at-law, write the	ame of the supervis	ing lawyer			Supervisin	g lawyer membersh	ip ID
Mailing address							
Green Corner Bu	ilding, off	ice no. 203	3				
Rigga Road, Dei	ra-Dubai, U	AE					
Postal code/ZIP							
64566							
Telephone number	Country code		Number				
	(971)	<u> </u>	2280422				
Fax number	Country code		Number				
	(971)	04	2280424				
Email address (if applicable							
missions@nascin	tl.com						
pecific email address. 'our representative's	leclaration:		are hereby authorizing Citizer	one and minigratio	in ounded to train	mit your me and	r personal illiorniation to
	cept that I am the	e person appoin	complete and correct. Inted by the applicant to cond	uct business on the	applicant or spon	sor's behalf with	Citizenship and Immigra
Signature of represe	ntative						
Signature of represe	ntative		(YYYY-MM-DD) 2019-06-26				
Date		NE 4 DEDDESS	2019-06-26				
Date)F A REPRESE	2019-06-26				
Date ON C: CANCEL THE withdraw my authoriza	APPOINTMENT (n to serve as my	2019-06-26 ENTATIVE y representative, to receive inf	ormation on my case	e file and to condu	ct business on m	ıy behalf with Citizenship
Date ON C: CANCEL THE withdraw my authoriza mmigration Canada and	APPOINTMENT (ion for this person I Canada Border	n to serve as my	2019-06-26 ENTATIVE y representative, to receive inf	ormation on my case	e file and to condu	ct business on m	ıy behalf with Citizenship
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Date HON C: CANCEL THE withdraw my authoriza mmigration Canada and Your representative's it Family name (Surname) Given name(s) Name of firm or organiz (if applicable) HON D: YOUR DECLAI Your declaration I declare that I have I also declare that I li	APPOINTMENT Of this person of Canada Border sull name attion RATION fully and truthfully lave read and under the control of	n to serve as my Services Agency	entative y representative, to receive infect.	attached application	(if applicable).		
Date ON C: CANCEL THE withdraw my authoriza mmigration Canada and four representative's a family name (Surname). Signature of application.	APPOINTMENT Common-law p	n to serve as my Services Agency v answered all qu derstood all the s	puestions on this form and any statements on this form, havin	attached application	(if applicable).		

The information you provide on this form is collected under the authority of the *Immigration and Refugee Protection Act* and the *Citizenship Act* and will be used in assessing your application according to the requirements of the Act. It will be retained in a Personal Information Bank identified in **Infosource**. The information may be shared with other organizations such as the Canada Border Services Agency (CBSA), the Royal Canadian Mounted Police (RCMP), the Canadian Security and Intelligence Service (CSIS), where there is an agreement or arrangement with a foreign government, in accordance with subsection 8(2) of the *Privacy Act*. Pursuant to the *Immigration and Refugee Protection Regulations* and the *Citizenship Regulations*, the information may also be shared with a regulatory body that is responsible for governing or investigating the conduct of representatives, such as a provincial and territorial law society, the *Chambre des Notaires du Québec* and the Immigration Consultants of Canada Regulatory Council (ICCRC). Under the *Privacy Act* and the *Access to Information Act* individuals have the right to protection of and access to their personal information. Details on these matters are available at infosource.gc.ca. **Infosource is also available in Canadian public libraries**.

Your representative's contact information