

General Information

Subject to the exceptions set out in the *Act respecting access to documents held by public bodies and the protection of personal information*, Francisation Québec is not authorized to communicate your personal information to another person without your consent. If you wish to allow a person (whether belonging to an organization or not) to have access to information concerning your application for admission to a French course and financial assistance, if applicable, or to allow that person to act on your behalf in connection with an application for a French course, you must complete this authorization. An authorization is valid for the duration of the processing of your application and during your training unless revoked in writing.

Important

This form contains two types of authorization:

Authorization to Disclose Personal Information:

- Allows to send this person information related to my application throughout the application process and during my training.
- Does not give the designated person the authority to represent you or to act on your behalf with Francisation Québec. If you wish
 to grant a proxy to someone to act on your behalf or represent you, you must select the option Act on my behalf for my application.

Act on my behalf for my application:

- Allows this person to represent me and provide information about my application throughout the application process and during my training.
- Allows you to designate a person to represent you (act on your behalf) when applying to Francisation Québec. When this type
 of authorization is chosen, you authorize this person to have access to the information contained in your application with
 Francisation Québec.

Submitting the application

This duly completed and signed form must be transmitted as follows:

Status in Canada	The course format you are registered in is	Means of submitting	
Canadian-born	Part-time	 In your Apprendre le français account: Access your file on the platform Apprendre le français. Follow the instructions to submit your document. Once the document has been submitted, you will be notified by email and you will receive a confirmation message in your message centre of the platform Apprendre le français. 	
	Full-time		
Immigrant	Part-time	If you have an account on the platform Apprendre le français, you must send us your documents through this account. No mail-in requests will be accepted.	
	Full-time	By mail to the following address: Ministère de l'Immigration, de la Francisation et de l'Intégration (MIFI) Direction des admissions et inscriptions de Francisation Québec 1200, boulevard Saint-Laurent, bureau 2.200 Montréal (Québec) H2X 0C9	

For more information

Visit our website at: https://www.quebec.ca/en/education/learn-french.

You can also contact our Contact Centre at 514 864-9191, if you are in the Montréal area, or at 1 877 864-9191 (toll-free) from anywhere else in Québec.

Instructions for adding an electronic signature to the PDF document

- 1. Browse to the page where you want to insert your signature.
- 2. Click on the **Tools** tab.
- 3. Click on the **Fill & Sign** icon.
- 4. In the the toolbar, click on **Sign yourself**.
- 5. Select **Add Signature** from the drop-down menu. A pop-up box will open. Select the "**Type**" option to write your name using the keyboard or the "**Draw**" option to draw your signature using the mouse.
- 6. Click Apply.
- 7. Click again on **Sign yourself** in the toolbar.
- 8. Select your signature and scroll with the cursor to apply it at the desired place.









Authorized person or Proxy – Francisation Québec

You must write your first and last names in capital letters as they appear on your immigration or identity document.	1. Information about your identity				
	Last name at birth	First name(s)			
You must enter your individual reference number as indicated on your Certificat de sélection du Québec or on your Apprendre le français record number if you know it.	Gender: Female Male	11	ı		
	Individual reference number or record number for Apprendre le français	Date of birth	h (year/month/day)		
Indicate the first and last names of the person with whom Francisation Québec will be sharing your information or the person who will be acting on your behalf.	2. Information about your proxy				
	Last name at birth	First name(s)			
	Gender: Female Male				
	Street address Street	Apartment	City		
	Province	Postal Code	Country		
	Home Phone Other phone number				
	Email				
	Name of organization or company (if applicable)				
	3. Authorization				
of authorization from the two available choices and indicate the start date for that authorization. The start date takes effect on the date the form is signed.	Authorization Type (one choice only):				
	Authorization to release personal information: I authorize Francisation Québec to release my personal information to the person designated in section 2.				
	OR				
	Act on my behalf in connection with my application: I authorize Francisation Québec to share any necessary documents or personal information with the person designated in section 2. I give this person the mandate to represent me, with Francisation Québec, for any question related to my application, throughout the application process and during my training.				
	I acknowledge that this authorization or proxy supersedes any previous authorization.				
Please review the text carefully and sign the authorization.	<u>. </u>		11		
	Signature		Date (year/month/	/day)	