



Official use only

Individual reference number

File number

**Important** – You must sign this form and enclose it with your application if you are paying the required fees by credit card.  
Information on the collection of personal information: please refer to page 2 of the document.

**Reason for the application**

**Application from an employer  
concerning a job offer:**

Temporary      Permanent

**Application for temporary selection for:**

Temporary work

**Application for an undertaking –  
Family reunification**

**Comparative evaluation for studies done  
outside Québec**

**Application for permanent selection for:**

Skilled worker  
(Québec experience  
program only)

Self-employed worker

Entrepreneur

**Recognition as an immigration consultant:**

Application for recognition

Renewal

The contact information for the principal applicant must be provided if he or she is not the credit card holder.

► **Principal applicant (person making the application)**

Family name  First name

Date of birth (year/month/day)

Provide the family name and first name of the credit card holder. You must send us the original form signed by the cardholder. A photocopy will not be accepted.

► **Authorization**

I authorize the Ministère de l'Immigration, de la Diversité et de l'Inclusion to charge the amount of CAN\$  to my credit card.

Family name  First name

Signature  Date (year/month/day)

**Carte de crédit**

Visa      MasterCard

Numéro

Expiration    
(Mois) (Année)

American Express

Numéro

Expiration    
(Mois) (Année)

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## Personal Information

The personal information and debit authorization that you provide on this form are required to process the fees due and payable at the time of application for selection and comparative evaluation of studies completed outside of Québec or for recognition as an immigration consultant, as provided for in sections 73, 74, 75 and 78 of the *Québec Immigration Act* (CQLR, chapter I-0.2.1) and section 7 of the *Act respecting the Ministère de l'Immigration, de la Diversité et de l'Inclusion* (CQLR, chapter M-16.1).

If the application is inadmissible, we will inform you that this form and the information it contains will be destroyed. The personal information collected on this form will be treated as confidential and only duly authorized personnel of the Ministère de l'Immigration, de la Francisation et de l'Intégration (the Ministry) will have access to it. The information will be used and disclosed, where applicable, in accordance with the *Act respecting Access to documents held by public bodies and the Protection of personal information* (CQLR, chapter A-2.1) (Access Act).

All fields on this form are mandatory. Any failure or refusal to provide the requested information may result in the rejection of your application or delay in its processing. The consent you give on this form to use your personal information is valid only for the period of time required to process the fees.

The personal information collected on this form will be retained for the period specified in the Ministry's retention schedule and then destroyed. You have the right to know what information about you is kept by the Ministry. If you believe that any information is inaccurate, you may have it corrected by sending a written request to the person responsible for access to documents and the protection of personal information.

If you have any questions about this form, please contact the Ministry by phone at 1-877-864-9191.

We also invite you to consult the Politique de confidentialité (Privacy policy) applicable to the Ministry's websites.

If, after contacting us, you feel that the use of your personal information does not comply with the Access Act, you may file a complaint with the Commission d'accès à l'information du Québec.