Protection of personal information

The personal information appearing on this form is required for processing your application for a « Certificat de sélection du Québec » (CSQ) (Québec Selection Certificate) and the application of the *Act respecting immigration to Québec,* the *Regulation respecting the selection of foreign nationals* and their administrative regulations. This information may also be used by the Minister responsible for the application of the *Act respecting immigration to Québec* for the purpose of studies, statistics or program evaluation or to convey to you any information likely to have an impact on the conditions of your immigration to Québec.

Access to this information is reserved exclusively for those authorized under the provisions of the *Act respecting access to documents held by public bodies and the protection of personal information* (R.S.Q., c. A-2.1). You may be informed of any information concerning you held by the Minister and, where appropriate, request in writing that it be corrected. For more information, please contact the office processing your application.

Personal information is confidential and may not be disclosed without your consent. However, the Minister may **without your consent:**

– convey personal information to Canadian immigration authorities and Québec public bodies when necessary for the application of a law in Québec;

– be authorized to convey personal information to these bodies if it is necessary for the exercise of their responsibilities or the implementation of a program they manage.

Declaration

I understand that:

The Minister responsible for enforcing the *Act respecting immigration to Québec* may revoke a selection certificate issued on the basis of false or misleading information or documents, by mistake, or if the conditions required to issue a selection certificate no longer exist.

The Minister may obtain directly or by the means of an intermediate third-party confirmation of the accuracy of this information.

I am breaking the law if I give the Minister, inquiry officer or reviewer information that I know or should know is false or misleading with respect to my application for a Certificat de sélection du Québec.

I declare that:

The information contained in this application is accurate and complete.

In witness whereof, I have signed in _____ year month day
City / Country

Signatures: _____ _____
Dependent child Principal applicant

Photographs

Please attach a passport format photo of yourself and any dependent child(ren) accompanying you.