

# Statutory Declaration from Non-Accompanying Parent/Guardian for Minors Immigrating to Canada

## New Brunswick Provincial Nominee Program (NBPNP)



This form must be filled out by the non-accompanying parent/guardian, former spouse or former common-law partner and be witnessed by a notary public. A copy of this form must be completed for each child travelling to Canada.

NON-ACCOMPANYING PARENT/GUARDIAN INFORMATION				
Family name(s) exactly as shown on your passport or travel document			Relationship to Child	
First name(s) exactly as shown on your passport or travel document			Middle name(s) exactly as shown on your passport or travel document	
Current mailing address, including postal code (All correspondence will go to this address unless you indicate your email address)				
PO Box	Apt./Unit	Street no.	Street name	City or Town
Country	Province or State		District	Postal Code

CHILD'S INFORMATION	
Family name(s) exactly as shown on your passport or travel document	Date of birth (mm-dd-yyyy)
First name(s) exactly as shown on your passport or travel document	Middle name(s) exactly as shown on your passport or travel document

I, \_\_\_\_\_, declare that I have no objections to my  
 (name of non-accompanying parent/guardian, former spouse or former common-law partner)

child: \_\_\_\_\_,  
 (full name of child) (child's date of birth mm-dd-yyyy)

immigrating to Canada with his/her parent/guardian.

DECLARATION	
To be completed by the non-accompanying parent/guardian, former spouse or former common-law partner, in front of the witness. Present your original identification card to the witness.	
I do declare that the information I have given in the forgoing application is truthful, complete and correct, and I make this declaration believing it to be true and knowing that it is of the same force and effect as if made under oath. I have read and understood all the above information, having had the opportunity to ask for and obtained an explanation on every point which was not clear to me. I have read and understood the contents of this declaration and by signing and returning this declaration, I am confirming that I fully understand that I may be permanently separated from my above-named child.	
Non-accompanying parent/guardian, former spouse or former common-law partner signature	Date (mm-dd-yyyy)
Witness name – notary public (block letters)	Witness – notary public professional chop/stamp
Witness title - notary public (block letters)	
Witness signature - notary public	

Personal information on this form is collected under the authority of the *Immigration and Refugee Protection Act*, SC 2001 c.27. The purpose of the collection is to process your application for the New Brunswick Provincial Nominee Program (NBPNP). The information will be used for research, performance measurement and/or evaluation of the Program. If you have any questions about the collection and handling of personal information you may contact the Director of Operations, Compliance & Integrity, Government of New Brunswick at Place 2000, 250 King Street, Fredericton, New Brunswick, Canada, E3B 9M9. Telephone: (506) 453-3981; Email: [immigration@gnb.ca](mailto:immigration@gnb.ca); Website: [www.welcomenb.ca](http://www.welcomenb.ca).