

Student Authorization for Provincial Attestation Letter

1. As of January 22, 2024, the Department of Immigration, Refugees and Citizenship Canada (“IRCC”) requires that a provincial attestation letter (PAL) be included with certain study permit applications. I authorize Apex Language and Career College (“ALCC”) to act on my behalf for the purpose of obtaining a PAL from the Nova Scotia Department of Advanced Education (“Advanced Education”), including:
 - a. requesting a PAL on my behalf;
 - b. receiving the results of my request for a PAL, including receiving the PAL itself (if issued);
 - c. requesting my PAL be amended in the event of an error or omission; and
 - d. communicating with Advanced Education with respect to (a) – (c).
2. I understand and acknowledge that Advanced Education is a public body within the meaning of the *Nova Scotia Freedom of Information and Protection of Privacy Act*, SNS 1993, c. 5 (“FOIPOP”) and is authorized to collect, use and disclose my personal information in accordance with FOIPOP.
3. I understand and acknowledge that when a request for a PAL is made on my behalf Advanced Education needs to collect my personal information, including my name, date of birth, contact information, and information about my program of study and enrollment status at ALCC.
4. I consent to Advanced Education using my personal information for the following purposes:
 - a. processing requests from ALCC to issue a PAL on my behalf; and
 - b. issuing a PAL in the form and content required by IRCC; and
 - c. monitoring, auditing and evaluating the policies and processes related to PALs, including planning and developing policies, strategies and programs related to program integrity that may be developed or implemented by the Province or IRCC.
5. I consent to Advanced Education disclosing my personal information:
 - a. to ALCC for the purposes set out in paragraph 4;
 - b. to IRCC, as necessary, for the purpose of verifying a PAL provided to me; and
 - c. to IRCC for the purpose set out in paragraph 4(c), subject to an information sharing agreement being entered into by Advanced Education and IRCC.
6. I understand and acknowledge that Advanced Education may disclose my personal information **without my consent** if the disclosure is required or authorized by FOIPOP or an order issued by a court of competent jurisdiction.
7. I understand and acknowledge that Advanced Education will only issue **one** PAL to me between the date the PAL is issued and the date it expires. During this time period, no other Nova Scotia designated learning institution can obtain another PAL on my behalf.



8. I understand and acknowledge that this consent and authorization is valid for one (1) year after the date it is signed, unless I revoke it in writing by contacting ALCC.
9. I understand and acknowledge that if I have any questions about the collection, use, retention, disclosure, or destruction of personal information by Advanced Education, I may contact postsecondary@novascotia.ca.

Signature of student

Date signed

STUDENT INFORMATION

First (Given) Name: _____ Last (Family) Name: _____

Date of Birth: ____/____/____ (Day/Month/Year)

E-mail Address: _____

Mailing Address: _____

Province /State: _____ Postal Code: _____ Country: _____

Please note: *The above information should be the same information in your study permit application.*

