



CITY OF
PRINCE GEORGE

REQUEST FOR BC PNP REFERRAL FROM THE CITY OF PRINCE GEORGE

Submission instructions:
Send your completed forms to sandro.bravo@princegeorge.ca

A. ENTREPRENEUR CONTACT & BUSINESS INFORMATION		
FIRST NAME:	LAST NAME:	DATE OF BIRTH:
PHONE NUMBER:	EMAIL:	
INDUSTRY GROUP OF PROPOSED BUSINESS (4-DIGIT NAICS):		DATE OF EXPLORATORY VISIT:
Reason for choosing Prince George to establish your business:		
What settlement support are you aware of to assist your family to successfully establish in our community?		
Brief description of proposed business:		

B. ENTREPRENEUR DECLARATION	
By submitting this referral form to the City of Prince George, I acknowledge:	<input checked="" type="checkbox"/>
• All information submitted in this form is true to the best of my knowledge	<input checked="" type="checkbox"/>
• I will accept the referral decision of the community unconditionally	<input checked="" type="checkbox"/>
• The City of Prince George may request further information from me before making a referral decision.	<input checked="" type="checkbox"/>
• A referral from the City of Prince George does not guarantee that I will be invited to apply through the BC PNP's Entrepreneur Immigration – Regional Pilot.	<input checked="" type="checkbox"/>
I consent to the use and disclosure of all business and personal information related to my referral from the City of Prince George to the BC PNP for the purposes of assessing my registration and application to the BC PNP's Entrepreneur Immigration – Regional Pilot.	<input checked="" type="checkbox"/>
FIRST NAME:	LAST NAME:
SIGNATURE:	DATE:

Attachments

Please attach the following in your submission, if available:

- Self-assessment score from the BC PNP registration system
- Proof of English language proficiency
- Resume