

CLASS ACTION QUESTIONNAIRE

If you are making this claim on behalf of yourself, please provide your information in Sections A and B.

If you are making this claim as the representative of a former employee's Estate that meets the Class criteria, please provide the Estate information in Sections A and B and complete Section C with the representative information.

A. Employee Information (or Estate Information)

Name: _____

Address: _____

Telephone: _____

Email: _____

B. Employment Information

1. When were you employed at the College of the North Atlantic - Qatar?

2. For what term(s) were you employed at the College of the North Atlantic - Qatar?

3. What role were you employed to fulfill at the College of the North Atlantic - Qatar?

4. For taxation purposes, during your term(s) of employment, did you retain your Canadian Residence, or did you declare yourself Non-Resident?

5. What was your Base Salary and/or Management Fee Base (MFB) during your contract term(s)? If this is unknown to you, please indicate as such.

C. Representative Information

Name: _____

Address: _____

Telephone: _____

Email: _____