

The personal information provided on this form and attachments is collected under the authority of section 33(c), and managed in accordance with the *Freedom of Information and Protection of Privacy Act*. The information will be used for the purpose of administering the Alberta Immigrant Nominee Program. If you have any questions about the collection of this information, you can contact the Alberta Immigrant Nominee Program, Suite 940, Telus Plaza North Tower, 10025 Jasper Avenue, Edmonton, Alberta, Canada, T5J 1S6. Email: ainp.info@gov.ab.ca. Fax: 780-427-6560.

Is this for a Skilled or Semi-Skilled Worker Application? Skilled Worker Semi-Skilled Worker

A. Employer Details **File Number (office use):**

Company name:	Name of employer contact:	Title of employer contact:
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Employer's address:

City / Town:	Province / Territory:	Postal code:
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Employer's website:	Employer's phone:	Employer's fax:
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Employer's email:

Head office address: *(if applicable)*

Number of employees in Alberta:	Year business established:	How many Temporary Foreign Workers currently work for the employer in Alberta?
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Describe the company:

Address of employment of candidate: (check here if same as above)

City / Town:	Prov. / Terr. / State:	Postal / Zip code:	Country:
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B. Candidate Details

Candidate's family name:	Candidate's given name(s):
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Candidate's residential address:

City / Town:	Prov. / Terr. / State:	Postal / Zip code:	Country:
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Candidate's mailing address: (check here if same as above)

City / Town:	Prov. / Terr. / State:	Postal / Zip code:	Country:
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Candidate's home phone:	Candidate's cell phone:	Candidate's work phone:	Candidate's fax:
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Candidate's email:

C. Candidate's Job Details

Current job title: _____

Is this a permanent and full-time job? Yes No

Is this a union position? Yes No

Union name: _____

Current wage or salary:

Hourly Annual \$ _____ CAD

How long has this candidate been working for this employer? (*specify months*) _____

Describe how the employer hired, or learned about, the candidate. If any type of third party was used to help hire or recruit the candidate, provide their name and complete contact information.

D. Document Checklist

The document checklist specific to this category can be found on our website:

www.AlbertaCanada.com/skilled-dc.pdf

I have attached all required and supporting document outlined in the document checklist: Yes No

E. Use of a Representative

As the employer, I have used a representative or third party in connection with this application to the AINP. Yes No

If the answer is "yes", the employer must complete the *Employer - Use of a Representative (AINP 008A)* form, which can be found on our website: www.AlbertaCanada.com/AINP008A

As the Candidate, I have used a representative or third party in connection with this application to the AINP. Yes No

If the answer is "yes", the Candidate must complete the *Candidate - Use of a Representative (AINP 008B)* form, which can be found on our website: www.AlbertaCanada.com/AINP008B

F. Declaration and Authorization of Employer's Authorized Signing Official

By signing and submitting this form, I confirm that I am the **employer's** authorized signing official and that:

1. I have provided true, complete and correct information in this application.
2. I acknowledge that the Alberta Immigrant Nominee Program (AINP) will disclose, as necessary, information collected from this application under the program, to officials in the Government of Alberta, including but not limited to partner ministries, and to officials administering immigration, temporary foreign worker or other programs related to permanent residence or temporary residence within the Government of Canada.
3. I acknowledge that the AINP may decline this application or withdraw a Nomination(s):
 - a. If I have submitted any false statements or concealed a relevant or significant fact. Both constitute misrepresentation;
 - b. If there is any change to the employment offer or contract with the candidate as an indeterminate or permanent full-time employee;
 - c. If the employment does not meet provincial employment and wage standards;
 - d. If I select a candidate who does not meet the required qualifications for the job;
 - e. If the offer of employment conflicts with existing collective bargaining agreements; or
 - f. For reasons other than the preceding statements. As a result of this decline or withdrawal, the AINP may refuse to consider me as an Employer Applicant for an unspecified period.
4. This Candidate's work permit is issued for the same employment as that for which the request in this application form is being made, if this Candidate is employed as a temporary foreign worker. Further, if the terms and conditions of the work permit do not match the information in this application, I acknowledge that I will be asked by the AINP to provide further information.
5. I acknowledge that the employer is responsible for notifying the AINP immediately of any change to the status of employment of the Candidate(s) considered or selected for nomination under this job title in my (the employer's) company, which includes, but is not limited to, change of job (title or duties), layoff or termination.
6. I confirm my understanding of the previous statements, and have asked for and received an explanation, or language translation if required, of every point that was not clear to me.
7. I consent to be contacted to complete brief questionnaires to evaluate this program. I understand that a third party may be used to administer these questionnaires.

Employer Authorization *Original signatures are required on the application in blue ink.*

Name of employer's authorized signing official (print)

Job title of of employer's authorized signing official

Signature of employer's authorized signing official

Date signed (yyyy/mm/dd)

G. Declaration and Authorization of Candidate

By signing and submitting this form, I, as the **Candidate**, confirm that:

1. I have provided true, complete and correct information in this application.
2. I authorize the employer, when applicable, to provide a copy of the following supporting documents to the Alberta Immigrant Nominee Program (AINP) to help in assessing my eligibility under the AINP:
 - a. A copy of my current, and previous (if applicable), Citizenship and Immigration Canada (CIC) work permits;
 - b. A copy of the current, and previous (if applicable), Service Canada or HRSDC Labour Market Opinion confirmation(s);
 - c. If exempt from the requirement for a Service Canada or HRSDC Labour Market Opinion, supporting documents to show the exemption under which the work permit was issued;
 - d. A copy of the employment contract. The contract includes the signature of the employer's authorized signing official and my signature as the candidate who is accepting the offer and conditions of employment.
 - e. A copy of my credentials, certification, license(s), and any other supporting documents relevant to carrying out a complete assessment of my eligibility under the AINP.
3. I authorize the AINP to collect and disclose, as necessary, information about me required to assess this application under the program, to and from officials in the Government of Alberta, including but not limited to partner ministries, and to officials administering immigration, temporary foreign worker or other programs related to permanent residence or temporary residence within the Government of Canada.
4. I understand all of the above statements, and have asked for and received an explanation, or language translation if required, on every point about which I may have been uncertain.
5. I consent to be contacted to complete a brief questionnaire to evaluate this program. I understand that a third party may be used to administer these questionnaires.

Candidate Authorization *Original signatures are required on the application in blue ink.*

Candidate's name (print)

Job title of candidate

Signature (candidate)

Date signed (yyyy/mm/dd)