

This form must be completed by the employer supporting an NSNP 100 application. It is not an employment contract, but verifies that an offer of employment has been made. This form is not applicable for the Family Business Worker Stream.

Section A – Employee Information

Name of worker: _____
(family name, given name(s))

Position offered: _____

Section B – Employer Information

1. Business name: _____

Name of business contact: _____

Mailing address:

_____ *street address* _____ *city, town or village* _____ *postal code*

Telephone: _____ Email: _____

Website: _____

2. Head office information, if applicable

Mailing address:

_____ *street address* _____ *city, town or village* _____ *country* _____ *postal code*

Telephone: _____ Email: _____

Corporate registry number: _____ Canada Revenue Agency business number: _____

Year business established: _____ Date business purchased: _____
(dd/mm/year)

3. Description of the company. Please provide a concise description of your company's type of industry, goods manufactured, or services provided and **attach** information on the business.

Number of employees in Nova Scotia:

Full Time: _____ Part Time: _____ Temporary Foreign Workers: _____

Section C – General Information

1. How did you learn about the Nova Scotia Nominee Program?

- | | |
|--|---|
| <input type="checkbox"/> Nova Scotia Office of Immigration Website | <input type="checkbox"/> Nova Scotia promotional material |
| <input type="checkbox"/> Industry association | <input type="checkbox"/> Applicant |
| <input type="checkbox"/> Other (please specify): _____ | |

2. How did you learn about this applicant?

- | | |
|--|---|
| <input type="checkbox"/> Employer recruiting activities | <input type="checkbox"/> Employee initiated contact with employer |
| <input type="checkbox"/> Lawyer (name) _____ | |
| <input type="checkbox"/> Immigration consultant (name) _____ | |
| <input type="checkbox"/> Recruiter (name) _____ | |
| <input type="checkbox"/> Other (please specify) _____ | |

Note:

An authorized, paid immigration representative must be a member in good standing of either the Immigration Consultants of Canada Regulatory Council (ICCRC), a Canadian provincial or territorial law society, or the *Chambre des notaires du Québec*. For more information on immigration representatives and who may assist you, see www.cic.gc.ca/english/information/representative/rep-who.asp

Employers using a recruiter to assist with hiring foreign workers must use a licenced recruiter. For more information on licenced recruiters see <http://novascotia.ca/lae/employmentrights/FW/LicensedRecruiters.asp>

For more information on hiring immigrants visit the Nova Scotia Office of Immigration's employer webpage at <http://novascotiainmigration.ca>.

Employers' Registration for the Purpose of Hiring Foreign Workers

The Nova Scotia *Labour Standards Code* regulates the hiring of foreign nationals to work in Nova Scotia.

Employers require a **registration certificate** from the Labour Standards division of the Department of Labour and Advanced Education to lawfully hire a foreign worker in Nova Scotia. Employers **must** provide the Nova Scotia Office of Immigration with a copy of the registration certificate.

- Employers need to provide the registration certificate when applying to Service Canada for a Labour Market Impact Assessment (LMIA).
- There is no fee for the registration certificate.

Recruiting Foreign Workers

The *Labour Standards Code* contains rules about recruiting foreign nationals to work in Nova Scotia.

- Recruiters who want to recruit foreign workers for employment in Nova Scotia must be licensed by Labour Standards to engage in this work.
- Employers who do their own recruitment do not need a license.
- Labour Standards posts a list of licensed recruiters:
<http://novascotia.ca/lae/employmentrights/FW/LicensedRecruiters.asp>

For more information, contact Labour Standards at (902) 424-4311 or 1 (888) 315-0110 (toll free in Nova Scotia) or by visiting <http://novascotia.ca/lae/employmentrights/FW/ForeignWorker.asp>

Section D – Position Information

Please ensure that you have attached:

- A detailed position description including roles and responsibilities, qualifications, education and experience required
- Detailed conditions of employment and all supporting documents; including, but not limited to:
 - Wages (if there is a probationary period, explain the length of time and pay during this period)
 - overtime pay
 - vacation time & vacation pay
 - holiday pay
 - hours of work
 - location of employment
 - benefits (including accommodations, if applicable)
- A copy of the accepted job offer with the signature of the authorized signing officer for your business and the signature of the employee accepting the offer

1. Is this a permanent, full-time position? Yes No
2. Annual salary: _____

3. Benefits and bonuses:

4. Education requirements:

University Trade School/College High School Other: _____

5. Canadian/Nova Scotia industry or association standards required: (please check all boxes that apply)

Industry standards _____

Association standards _____

Journeyman standards _____

Licenses: _____

Other _____

6. Is this a unionized position? Yes No *If yes, please attach a letter indicating union concurrence.*

7. Language fluency required for the position:

English	Read	Speak	Write	Listen	French	Read	Speak	Write	Listen
Fluent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fluent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Is this a new position? Yes No

9. Describe why you need this position in your business: (attach additional pages if necessary)

Section E – Mandatory Recruitment Activities

If this section is not completed the form will not be assessed and file will be closed.

Please note: all activities in this section must pre-date the applicant's Offer of Employment. Recruitment activities are also required for applicants with an open work permit.

1. Was the applicant's current work permit issued based on a valid LMIA? Yes No
If yes, provide a copy and continue to Section F.
If no, complete the following:
2. How long was this position vacant? _____ weeks _____ months _____ years
3. Was the position advertised? locally nationally

Where was the position advertised?

Newspaper Internet Magazine Other, please specify _____

List dates (*dd/mm/year*) position was advertised and attach copies of all published advertisements (newspaper, magazines, internet postings)

- If internet postings, provide:

Date posted _____ Date deleted _____
(*dd/mm/year*) (*dd/mm/year*)

Website(s)

Advertisement # _____ # of responses _____

4. State why the position could not be filled by a Canadian citizen or permanent resident
5. NOC Code _____
6. If you have not recruited for this position, explain why. (*Attach additional pages and supporting documents.*)

Section F – Support and Retention Plan

1. Describe any benefit plans, employee advancement opportunities, or other factors that may encourage the applicant to remain with your company.

2. Will your company provide the applicant and accompanying family with any assistance related to the payment of Government of Canada immigration fees, travel costs, or finding housing?

Yes No If yes, please explain.

3. Will your company provide settlement supports to assist the applicant and the accompanying family with matters such as orientation, language training or other settlement needs?

Yes No If yes, please explain.

Section G – Temporary Work Permit

The Nova Scotia Office of Immigration may provide a Letter of Support to a Nova Scotia nominee to apply for a new temporary work permit or for an extension to a still valid temporary work permit without Service Canada validation. The employer has to demonstrate a need for the applicant to start work before the issuance of a permanent resident visa.

1. Do you expect the applicant to apply for a temporary work permit before obtaining a permanent resident visa?

Yes No Please explain:

2. Would you like the Office of Immigration to issue a Letter of Support?

Yes No

Position NOC Code _____

Refer to <http://www5.hrsdc.gc.ca/NOC/English/NOC/2011/SearchAlphabetical.aspx>

Note: Once the applicant is nominated by the Province of Nova Scotia and receives a Letter of Support, he/she must attach the original of the letter to his/her application for a temporary work permit to Citizenship and Immigration Canada. This Letter of Support replaces the need for a Labour Market Impact Assessment (LMIA) from Service Canada for this position.

Section H – Authority to Collect and Disclose Information and Employer Declaration

Initial beside each statement and authorization to acknowledge agreement and then sign at the bottom of the page.

Initials

_____ This information release and declaration must be signed by the designated representative of the company.

_____ The company has a history of good workplace and business practices, and complies with all applicable laws and regulations, including, but not limited to the following statutes, as amended from time to time (please refer to official versions):

Labour Standards Code (as noted in Section C)

<https://www.novascotia.ca/lae/employmentrights/docs/labourstandardscodeguide.pdf>

Worker's Compensation Act as applied by the Worker's Compensation Board of Nova Scotia

http://www.wcb.ns.ca/wcbns/index_e.aspx?ArticleID=715

Immigration and Refugee Protection Act

<http://laws-lois.justice.gc.ca/eng/acts/l-2.5/FullText.html>

Nova Scotia Human Rights Act

<http://nslegislature.ca/legc/statutes/human%20rights.pdf>

Nova Scotia Occupational Health and Safety Act

http://nslegislature.ca/legc/statutes/occph_s.htm

Nova Scotia Health Protection Act, Food Safety Regulations (Food Services Industry Only)

<http://www.novascotia.ca/just/regulations/regs/hpafdsaf.htm>

_____ By signing, I authorize the Government of Nova Scotia to collect, use, retain, disclose, and destroy personal and business information to assess individual applications to the Nova Scotia Nominee Program. If I have any questions about the collection, use, retention, disclosure, or destruction of personal and business information, I may contact the Nova Scotia Office of Immigration. In addition, I authorize the Government of Nova Scotia to research, monitor, and evaluate the Program under the authority of the Nova Scotia *Freedom of Information and Protection of Privacy Act*, the *Immigration and Refugee Protection Act* and Regulations and other relevant Government of Canada legislation.

_____ I authorize immigration officials with the Government of Nova Scotia to disclose personal and business information to the Government of Canada, and to collect personal and business information from the Government of Canada, as necessary, for the purpose of assessing, verifying information, monitoring and evaluating the Nova Scotia Nominee Program, or in the event of any suspected non-compliance with any provincial or federal law.

_____ I understand that the Government of Nova Scotia may contact any person to verify information provided by me in this form.

_____ I consent to the Government of Nova Scotia collecting any personal, business and other information required as part of my company's involvement in the Nova Scotia Nominee Program and to locate and contact me and my company about evaluating the program and our participation in it.

_____ I consent to the Government of Nova Scotia collecting this information from any federal, provincial, municipal or other local authority or any other person, department, agency or organization holding such information.

_____ I consent to the sharing of the information in this form with the nominee to whom I have made a permanent full-time job offer.

_____ I consent to the sharing of the information in this form with employment agencies in Nova Scotia to confirm and facilitate local recruitment efforts.

Name of authorized signing officer *(Family name, given name)*

Title of authorized signing officer

Signature of authorized signing officer

Date *(dd/mm/year)*

Company Name

Street address

City, town or village

Postal Code

Please note that the Employer, and not a third party representative, must be a party to, and signatory of, the Employer Form.

Section I – Declaration of Authorized Signing Officer

Initial beside each statement and authorization to acknowledge agreement and then sign at the bottom of the page.

Initials

_____ I declare that the information I have given in this form is truthful, complete and correct, and give consent to the Government of Nova Scotia to verify any information I have provided in this form.

_____ I certify that, to my knowledge, the job offer noted above does not conflict with any bargaining agreements, the settlement of any labour dispute, the employment of a person involved in such a dispute, or any labour agreements/standards.

_____ I certify that I have provided confirmation of employment and other relevant documents to demonstrate my company's financial ability to honour this employment offer.

_____ I understand that any false statement or concealment of information may result in, but is not limited to, some or all of the following consequences:

- Refusal of the corresponding application to the Nova Scotia Nominee Program; and/or
- Refusal or withdrawal of the applicant's nomination; and/or
- Decision by the Office of Immigration to refuse to process other applications involving the company or companies associated with the company, the authorized signing officer or other officers or employees in the company.

_____ I understand all these statements and have asked for and received an explanation on every point that was not clear to me.

Name of authorized signing officer (*Family name, given name*)

Title of authorized signing officer

Signature of authorized signing officer

Signed at (*city/town and country*)

Date (*dd/mm/year*)

Please submit completed form or application to the address provided below:

Nova Scotia Office of Immigration

1741 Brunswick St., Suite 110A

P.O. Box 1535

Halifax, Nova Scotia

CANADA B3J 2Y3

Tel: (902) 424-5230

Fax: (902) 424-7936

Email: n SNP@novascotia.ca

Web: www.novascotiainmigration.ca