



Office of Immigration
Office de l'immigration

For Office of Immigration Use Only	Date:
Applicant File Number:	Employer File Number:

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Nova Scotia Nominee Program Application Form

The personal information that you provide in your application forms and supporting materials is collected, used, retained, and disclosed under the authority of the Nova Scotia *Freedom of Information and Protection of Privacy Act*. The information will be used to assist in evaluating your suitability for the Nova Scotia Nominee Program and to research, monitor, and evaluate the Program under the authority of the Nova Scotia *Freedom of Information and Protection of Privacy Act* and other relevant provincial legislation, the *Immigration and Refugee Protection Act* and Regulations and other relevant Federal legislation.

If you have any questions about the collection, use, retention, and disclosure of this information, please contact the Nova Scotia Office of Immigration.

Please refer to the NSNP Skilled Worker Application Guide when completing this application. Please ensure that all documents requested in the Application Guide are included with your application. Incomplete applications will not be processed.

This form should be completed for the Principal Applicant only. Please print clearly.

Please indicate the category under which you are applying: **Skilled Worker** **Community Identified**

How did you learn about the Nova Scotia Nominee Program? (you may check more than one box):

- Employer Nova Scotia Promotion Materials Nova Scotia Office of Immigration Website
 Visa office Other: _____

Assistance in completing application:

- Did you have help preparing your immigration forms? Yes No
 If yes, who provided this assistance? Employer Immigration Consultant Lawyer
 Other (please specify): _____

1. Application History

Has the applicant or a family member accompanying the applicant, previously been approved or has made applications for admission to Canada as an immigrant? Yes No

If yes, please provide the following information:

Principal Applicant's full name(s) (*family, given*): _____

Federal Category of Application(s): Skilled Worker Entrepreneur Family Class
 Investor Self-Employed Refugee Other: _____

Name of Province or Territory: _____

Date(s) of application (*mm/dd/year*): _____

Immigration office contacted: _____

Citizenship and Immigration Canada (CIC) File Number: _____ or

Provincial Nominee Program File Number: _____

Result: _____

Destination in Canada: _____

2. Personal Information

Principal Applicant

family name given name(s) date of birth (mm/dd/year)

street address city, town or village country postal code
(Do not use a representative, consultant, or lawyer's address for Street Address)

mailing address city, town or village country postal code

Phone (home): Fax (home):

Phone (business): Fax (business):

(Include country and area codes) Email:

Principal applicant's full name in native language:

In which city/town/region of Nova Scotia do you wish to settle?

Spouse, Common-law, or Conjugal Partner

family name given name(s) date of birth (mm/dd/year)

3. Relatives

Do you or your spouse have relatives living in Nova Scotia? Yes No

Do you or your spouse have relatives living in Canada? Yes No

If "Yes", provide details of your relatives living in Nova Scotia and Canada.

Name of Relative (family name, given name)	Town/City and Province	Telephone	Relationship (e.g. spouse's sister)	Years in Canada

Previous Visits: Please describe all previous stays in Canada by the principal applicant, spouse, common-law or conjugal partner or dependents

Who visited?	Dates (mm/dd/year)	Province(s) visited	Reason for Visit (e.g. vacation, business, employment)

4. Language Skills - For Principal Applicant

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

5. Education in Nova Scotia

Has the **Principal Applicant** studied in Nova Scotia? Yes No If yes, complete the following:

<i>From (mm/yy)</i>	<i>To (mm/yy)</i>	<i>Name of Educational Institution</i>	<i>City of Institution</i>	<i>Course, Degree, Certificate</i>

Has the **spouse, common-law partner or conjugal partner or any dependents** studied in Nova Scotia?

Yes No

If yes, complete the following:

<i>From (mm/yy)</i>	<i>To (mm/yy)</i>	<i>Name of Educational Institution</i>	<i>City of Institution</i>	<i>Course, Degree, Certificate</i>

6. Employment in Nova Scotia - For Principal Applicant

Intended Occupation in Nova Scotia: _____

Do you have an offer of employment: Yes No

If yes, please specify employer's name: _____

Has the **Principal Applicant** worked in Nova Scotia? Yes No

If yes, complete the following:

<i>From (mm/yy)</i>	<i>To (mm/yy)</i>	<i>Occupation</i>	<i>Name of Employer</i>	<i>City of Employer</i>

Has the **spouse, common-law partner or conjugal partner or any dependents** worked in Nova Scotia?

Yes No

If yes, complete the following:

<i>From (mm/year)</i>	<i>To (mm/year)</i>	<i>Occupation</i>	<i>Name of Employer</i>	<i>City of Employer</i>

7. Financial Information

IMPORTANT: You must present financial documents to support all the information and source of funds provided in this statement.

Please indicate all exchange rates used:

1 CAD \$ = _____ <i>(Provide exchange rate for your country)</i>	Date of exchange rate _____
1 CAD \$ = _____	Date of exchange rate _____
1 CAD \$ = _____	Date of exchange rate _____
1 CAD \$ = _____	Date of exchange rate _____

a. Assets

List all assets in Canadian dollars **AND** the value of any property owned by the principal applicant and all accompanying dependent family members. Do NOT include the value of jewellery, vehicles, and other personal assets. Use extra pages if necessary.

Description of Assets (Cash, Real Estate, Investments, Pensions, etc.)	\$ Amount
Total assets (add all amounts above) =	\$

b. Liabilities

List in Canadian dollars the amount of loans and other financial obligations, including mortgages, bank loans, fees owing to lawyers or consultants, alimony and child support payments owed by the principal applicant and all accompanying dependent family members. Use extra pages if necessary.

Description of Liabilities (Mortgage, Loan, Child Support, etc.)	\$ Amount
Total liabilities (add all amounts above) =	\$

Net Worth: Total Assets minus Total Liabilities (a - b) = \$

8. Authority to Collect & Disclose Information and Applicant Declaration

This information release and declaration must be signed by the principal applicant and all accompanying dependent family members 18 years or older, authorizing the Government of Nova Scotia to collect, use, retain, disclose, and destroy personal information to assess your application to the Nova Scotia Nominee Program and to research, monitor, and evaluate the Program under the authority of the Nova Scotia *Freedom of Information and Protection of Privacy Act* and other relevant provincial legislation, the *Immigration and Refugee Protection Act* and Regulations and other relevant Government of Canada legislation. If you have any questions about the collection of personal information, please contact the Nova Scotia Office of Immigration.

I, _____ date of birth _____
Principal applicant (*full name – family name, given name(s)*) *Day/Month/Year*

I, _____ date of birth _____
Spouse (*full name – family name, given name(s)*) *Day/Month/Year*

I, _____ date of birth _____
Dependent (*full name – family name, given name(s)*) *Day/Month/Year*

Dependent's relationship to Principal Applicant (e.g. eldest daughter)

of _____
Address

in the city/town of _____ country of _____

I authorize immigration officials with the Government of Nova Scotia and the Government of Canada to disclose, and collect, as necessary, all personal information contained in my application for the Nova Scotia Nominee Program and my federal immigration application regarding myself or any dependent member of my family for the purpose of assessing my application, verifying information in this application, and evaluating the Nova Scotia Nominee Program.

I do hereby authorize the Government of Nova Scotia to disclose and collect all personal information collected by and disclosed as part of my application for the Nova Scotia Nominee Program to other parties in Nova Scotia and elsewhere to assess this application.

I understand that the Government of Nova Scotia may contact such parties to verify information provided by me in this application. I understand that I have the right to examine and request corrections or amendments to my personal information, whether held by a provincial or federal government office.

I consent to the Government of Nova Scotia collecting any personal and other information, including information about my address(es), telephone number(s), social insurance numbers, marital status, employment, income, assets, liabilities, benefits received under other provincial and federal government programs or any other relevant personal information, required as part of my involvement in the Nova Scotia Nominee Program and to locate and contact me about evaluating the program and my 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.

Declaration of Principal Applicant and Spouse

I declare that the information I have given in this application is truthful, complete and correct.

I understand that any false statements or concealment of information may result in Citizenship and Immigration Canada and/or the Government of Nova Scotia refusing my application or, if applicable, withdrawing my nomination and/or my Canadian permanent residence visa.

I understand that my failure to provide a complete application package including all required forms and credible, supporting documentation may result in the return or refusal of my application.

I intend to settle in the Province of Nova Scotia upon landing in Canada.

I declare that I agree to provide the Nova Scotia Office of Immigration with my contact information (address, telephone, fax, email) within 30 days of arriving in Canada and to inform the Nova Scotia Office of Immigration of any change of address or telephone number for a period of three years after landing in Canada.

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

*Signature of **principal applicant***

*Signature of **spouse, common-law or conjugal partner***

Signature of witness

Signature of witness

Full name of witness (family name, given name)

Full name of witness (family name, given name)

Signed at (city/town and country)

Signed at (city/town and country)

Date (mm/dd/year)

Date (mm/dd/year)

*Signature of **dependent***

Signature of witness

Full name of witness (family name, given name)

Signed at (city/town and country)

Date (mm/dd/year)