Form: SINP-500-7



Employer Information, Declaration and Release Form

Completion of this form is voluntary; however, failure to provide any of the information may mean your request for a foreign worker may be turned down. (Please print clearly)

We authorize the SINP to share information with Human Resources and Skills Development Canada (HRSDC) and Citizenship and Immigration Canada (CIC) and any other federal /provincial/territorial departments and their agencies as well as municipal governments, unions and associations and other appropriate organizations as deemed appropriate by the SINP.

The position I/we intend to hire in is • all information provided by our organization to t	-
 the position provides wages and benefits equal to Canadians or permanent residents with similar sl the employment of the position does not conflict the settlement of any labour dispute or the employment. 	o those the organization does or would pay to kills and experience. YES NO with any existing bargaining agreements,
Number of positions:	
Contact Name and Title:	
Organization Name:	
Address:	
City/ProvincePostal	Code:
Telephone: Fax:	
Email Address:	
I have read and understand the above declaration.	
Signing Officer	Position
Signature	Date