

Net Worth

SASKATCHEWAN IMMIGRANT NOMINEE PROGRAM (SINP)

PLEASE PRINT OR TYPE APPLICATION

CATEGORY INFORMATION	
	APPLYING UNDER (CHOOSE ONLY ONE)
☐ SKILLED WORKER ☐ FARM OV	VNER/OPERATOR
PERSONAL INFORMATION	
FAMILY NAME	GIVEN NAME
DATE OF BIRTH	
HAVE VOLUMADE AN EVDI OD ATION TOD	TO CANADA IN THE TWO YEARS PRECEDING THE DATE OF
APPLICATION	TO CANADA IN THE TWO TEARS PRECEDING THE DATE OF
□No □Yes	
IF YES, PROVIDE DETAILS:	
IF YOU ARE APPLYING UNDER THE FARM	M OWNER/OPERATOR CATEGORY COMPLETE QUESTIONS 1and 2 AS

IF YOU ARE APPLYING UNDER THE FARM OWNER/OPERATOR CATEGORY COMPLETE QUESTIONS 1and 2 AS WELL AS THE PERSONAL NET WORTH STATEMENT.

IF YOU ARE APPLYING UNDER THE SKILLED WORKER CATEGORY COMPLETE ONLY THE PERSONAL NET

WORTH STATEMENT.

1. BUSINESS OR FARM OWNER/OPERATATOR OWNERSHIP/PERFORMANCE SUMMARY (PLEASE COMPLETE ONE FORM PER BUSINESS)				
A) NAME OF BUSINESS				
B) TYPE OF BUSINESS				
C) TYPE OF OWNERSHIP				
☐ PROPRIETORSHIP ☐ PARTNERSHIP ☐ CORPORATION				
D) IDENTIFY PARTNER AND PERCENTAGE (%) OF OWNERSHIP (INCLUDING SPOUSE PARTNER	OR COMMON LAW			
NAME OF PARTNER(S) WITH MORE THAN 10% OWNERSHIP	PERCENTAGE (%) OF OWNERSHIP			

E) BUSINESS OR FARM OWNER/OPERATOR OWNERSHIP IN THE 5 YEARS PRECEDING THE DATE OF APPLICATION

	ANNUAL SALES	NET INCOME (AFTER TAX)	NET ASSETS	NUMBER OF FULL-TIME JOB EQUIVALENTS
MOST RECENT OPERATING YEAR Month Year				
To Month Year				
PREVIOUS YEAR 1 Month Year				
To Month Year				
PREVIOUS YEAR 2 Month Year				
To Month Year				
PREVIOUS YEAR 3 Month Year				
To Month Year PREVIOUS YEAR 4				
Month Year				
To Month Year				

2. FARM OWNER/OPERATOR EXPERIENCE If you are applying in the Farm Owner/Operator category you are required to describe in detail all of your past farm experience.					

PERSONAL NET WORTH STATEMENT

A complete and current statement of total personal net worth of you and your spouse or common-law partner is required. All assets and liabilities must be identified. All assets must be your own personal holdings or your spouse's or common-law partner's, and must be documented. Do not include the value of jewelry, cars or other personal assets.

You must present financial statements and other documentation to support the information provided in this statement and to demonstrate your personal net worth.

ASSETS

A) BANK DEPOSITS

Current and Savings Accounts

Current and Daving			T	1
Date Opened	Financial Instit	ution and Account Number	Current Balance	Current Balance
Day/Month/Year			Foreign (specify currency)	Canadian
	•	Total		

Fixed (term) deposits

Fixed (term) deposits					,
Description	Date of Init	tial	Maturity Date	Current Balance	Current Balance
	Deposit		Day/Month/Year	Foreign (specify currency)	Canadian
	Day/Month	/Year	•		
		Tot	al		

Description	Year Purchased	\mathcal{U}				Estimated Curr Foreign	rent Market Valu
						(Specify Currence	y) Canadian
		1		1		1	
		†	1	1		1	
		+	 	+		+	
					Total	+ +	
				l	10141		
C) PUBLICLY TRA	DED STOCKS AN	D OTI					
Description				Quanti	ıty		rent Market Valu
						Foreign	
						(Specify Currency	y) Canadian
				r			
				Ì	Total		
D) BUSINESS(Use a		ecessar	y)			<u>.</u>	
Name	% Owned			Current Book Value (Net Assets)		Foreign	rent Market Valu
					· 	(Specify Currency	y Canadian
						Π	
		_	_		Total		
				_			
E) PENSIONS AND	OTHER ASSETS(Use se	parate	page if	necessary)		
Description	,		<u> </u>	<u>r </u>	· · · · · · · · · · · · · · · · · · ·	Amount	
						Foreign	
						Specify Currency	Canadian
					Total		
					Total		

Total	(Specify Currency)	Canadian
Total		
10.00		
	(speen) canency	Cunadran
	(Specify Currency)	Canadian
Total		
N\$		
1\$		
N \$		
IT IN CANADA	CDN\$	
	N\$ N\$	N\$ N\$

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE, TRUTHFUL AND CORRECT.					
APPLICANT'S NAME(please print)					
SIGNATURE	DATE				