

# Newfoundland and Labrador Provincial Nominee Program

## International Graduate Entrepreneur Category

### Application Form



Please refer to the appropriate **Newfoundland and Labrador Provincial Nominee Program Application Guide** for the category to which you are applying. **Please ensure that all documents requested in the Application Guide Document Checklist are included with your application.** The Office of Immigration and Multiculturalism (OIM) is unable to process incomplete applications.

**Note:** Both the principal applicant, and if applicable, associated partners seeking permanent residency through the proposed business must each complete this form.

Please indicate whether you are the principal applicant or an associated partner.

Principal Applicant      Associated Partner

#### Section A – Personal Information

Please give your family name and given names exactly as they appear on your passport or travel document.

Family name: \_\_\_\_\_

Given name: \_\_\_\_\_

Have you ever used any other name such as a maiden name, alias or nickname.    Yes      No

If yes, please provide the names.

Other family name(s): \_\_\_\_\_

Other given name(s): \_\_\_\_\_

Sex:      Male      Female      X (Unspecified)

Date of birth (dd/mm/year): \_\_\_\_\_

Country of birth: \_\_\_\_\_

Current citizenship(s): \_\_\_\_\_

In which country do you currently live? \_\_\_\_\_

If you currently live in Canada, what is your status? \_\_\_\_\_

Worker      Student      Visitor

Expiry date of your work permit, study permit or visitor record: (dd/mm/year): \_\_\_\_\_

If your permit or visa has expired or is about to expire, when did you apply for a new one?

(dd/mm/year): \_\_\_\_\_

Not applicable

## **PASSPORT or TRAVEL DOCUMENT**

Please give information exactly as it appears on your travel document.

Do you have a valid passport or travel document?      Yes      No

Passport or travel document number: \_\_\_\_\_

Issuing country: \_\_\_\_\_

Expiry date (dd/mm/year): \_\_\_\_\_

## **CONTACT INFORMATION** (Please do not give contact information for a consultant or lawyer who is representing you.):

### **Email address**

\_\_\_\_\_

(By giving an email address, you are agreeing to allow the Office of Immigration and Multiculturalism to send information about you and your dependents to this email address)

### **Telephone number(s)**

Please give the country code, area code if you have one, and telephone number where it is easiest to reach you.

\_\_\_\_\_

Mobile Number

\_\_\_\_\_

Home Number

\_\_\_\_\_

Work Number

## **Mailing Address**

\_\_\_\_\_

street address

\_\_\_\_\_

city, town or village

\_\_\_\_\_

province, state or district

\_\_\_\_\_

country

\_\_\_\_\_

postal code

## **Residential Address**

Is your home address the same as your mailing address?

Yes

No

If no, please provide details.

\_\_\_\_\_

street address

\_\_\_\_\_

city, town or village

\_\_\_\_\_

province, state or district

\_\_\_\_\_

country

\_\_\_\_\_

postal code

## RESIDENCES

Where do you currently live in Newfoundland and Labrador? \_\_\_\_\_

In the past five (5) years, have you lived for more than six (6) months in any country other than the one in which you are living now or the countries of which you are a citizen?

Yes

No

Please list all places where you lived in the past five (5) years. Use additional pages, if necessary.

**NOTE:** Please do not leave any gaps in time. Even a gap of one (1) month will delay processing your application.

From mm/year To mm/year	City or Town	Province, State or District	Country

## MARITAL STATUS

What is your current marital status?

Single

Married

Common-law

Legally separated

Divorced

Widowed

Other

If you are married or in a common-law relationship, provide the date (dd/mm/year) on which you were married or entered into the common-law relationship: \_\_\_\_\_

## DETAILS OF FAMILY MEMBERS

We require you to provide information about each member of your family if they are not already permanent residents or citizens of Canada. You must give this information even if your family members are not coming with you to Newfoundland and Labrador. Please provide all names exactly as they appear on passports or travel documents. Members of your family that must be included are:

- your spouse or common-law partner
- all of your dependent<sup>1</sup> children
- all of the dependent children of your spouse or common-law partner

	Spouse or Common-law Partner	Family Member	Family Member
Family name (as on passport or travel document)			
Given name (as on passport or travel document)			
Date of birth (dd/mm/year)			
Country of birth			
Country of citizenship			
Country of residence			
Sex			
What is this person's relationship to you?			
Will this person come with you to Canada?	Yes      No	Yes      No	Yes      No
<b>Passport/Travel Document</b>			
Document number			
Issuing country			
Expiry date (dd/mm/year)			
Native language/Mother tongue			
Highest level of education			

<sup>1</sup> According to Immigration and Refugee Protection Regulations (IRPR), a dependent is a child who depends on their parent for financial and other support. A son or daughter is considered a dependent of their parent when the child is:

- under 22 years old, and does not have a spouse or partner, or
- 22 years old and over, and has depended largely on the parent's financial support since before the age of 22 due to a physical or mental condition

## DETAILS OF FAMILY MEMBERS (Continued)

	Family Member	Family Member	Family Member
Family name (as on passport or travel document)			
Given name (as on passport or travel document)			
Date of birth (dd/mm/year)			
Country of birth			
Country of citizenship			
Country of residence			
Sex			
What is this person's relationship to you?			
Will this person come with you to Canada?	Yes      No	Yes      No	Yes      No
<b>Passport/Travel Document</b>			
Document number			
Issuing country			
Expiry date (dd/mm/year)			
Native language/Mother tongue			
Highest level of education			

## Section B – Personal History and Work Experience

Please provide details of your personal history for the past five (5) years. If you are under 23 years old, please include these details since the age of 18. Please begin with the most recent information. Under “Activity”, write your occupation or job title if you were working. If you were not working, tell us what you were doing, for example: unemployed, studying, travelling, retired, in detention.

**NOTE:** Please do not leave any gaps in time. Even a gap of one (1) month will delay processing your application.

[illegible]

## Section C – Application History

### Federal Application

Have you or a family member coming with you, ever applied to Immigration, Refugees and Citizenship Canada for admission as a permanent resident or refugee claimant?

Yes

No

**If yes, please complete the following.**

Applicant's full name: \_\_\_\_\_  
Family name, Given name

Immigration, Refugees and Citizenship Canada file number: \_\_\_\_\_

Date of application (dd/mm/year): \_\_\_\_\_

Result (in-process, approved, refused, rescinded, withdrawn): \_\_\_\_\_

Where in Canada had you planned to live? \_\_\_\_\_

Has the applicant or a family member accompanying the applicant ever been refused a work permit, visitor visa, or been refused entry to Canada? Yes No

**If yes, please include a copy of the Refusal Letter with this application.**

### Provincial Application

Have you or a family member accompanying you ever applied for provincial nomination or permanent residence under any other provincial or territorial program?

Yes

No

**If yes, please complete the following.**

Applicant's full name: \_\_\_\_\_  
Family name, Given name

Province or territory of application: \_\_\_\_\_

File number: \_\_\_\_\_ Date of application (dd/mm/year): \_\_\_\_\_

Result (in-process, approved, refused, withdrawn): \_\_\_\_\_

## Section D – Language

### Your Language Ability

Native Language or Mother Tongue: \_\_\_\_\_

Which do you use most often, English or French?

English

French

Have you taken a Canadian English Language Proficiency Index Program (CELPIP) general test or International English Language Testing System (IELTS) general training test to assess your ability in English within the last two (2) years?

Yes

No

If yes, please indicate which test?

Canadian English Language Proficiency Index Program (CELPIP) general test

International English Language Testing System (IELTS) general training test

Date of Test (dd/mm/yyyy): \_\_\_\_\_

	Listening	Speaking	Reading	Writing
Enter your scores				
Enter equivalent Canadian Language Benchmark scores <sup>2</sup>				

Have you taken a Test d'évaluation du français (TEF) to assess your ability in French within the last two (2) years?

Yes

No

Date of Test (dd/mm/yyyy): \_\_\_\_\_

	Listening	Speaking	Reading	Writing
Enter your scores				
Enter equivalent Canadian Language Benchmark scores				

**Proof of your language test must be attached (Results of your official English language proficiency test (CELPIP – General or IELTS – General Training) OR your official French language proficiency test (TEF))**

<sup>2</sup> For help converting your language test scores to a Canadian Language Benchmark equivalent, refer to the IRCC language test equivalency charts online at <https://www.canada.ca/en/immigration-refugees-citizenship/corporate/publications-manuals/operational-bulletins-manuals/standard-requirements/language-requirements/test-equivalency-charts.html>



## Section E – Newfoundland and Labrador or Other Canadian Connections

Have you, your spouse or common-law partner, or any of your dependent children lived in or visited Canada in the last 10 years?

Yes No

If yes, please describe each time you, your spouse or common-law partner, or any of your dependent children lived in or visited Canada.

[illegible]

Do you have family members living in Canada? Family members include your mother, father, dependent children, brothers, sisters, aunts, uncles, cousins, grandparents, grandchildren, nieces, and nephews.

Yes      No

Please include the following information for ALL family members living in Canada.

**NOTE:** You must provide proof of relationship, proof of relative's status and proof of relative's residency.  
(Adaptability points provided only for relatives 19 years or older on date of application who are Canadian citizens or permanent residents living in Newfoundland and Labrador for at least one (1) continuous year.)

Applicant		
Name of relative (family name, given name)	Relationship (e.g., sister)	Province or Territory
Are they a Canadian citizen or permanent resident?	Telephone Number	Years in Canada
Yes      No		
Yes      No		
Yes      No		
Yes      No		
Yes      No		
Yes      No		

Does your spouse or common-law partner have family members living in Canada? Family members include their mother, father, dependent children, brothers, sisters, aunts, uncles, cousins, grandparents, grandchildren, nieces, and nephews.

Yes

No

Please include the following information for ALL family members living in Canada.

**NOTE:** You must provide proof of relationship, proof of relative's status and proof of relative's residency. (Adaptability points provided only for relatives 19 years or older on date of application who are Canadian citizens or permanent residents living in Newfoundland and Labrador for at least one (1) continuous year.)

Spouse or common-law partner		
Name of relative (family name, given name)	Relationship (e.g., sister)	Province or Territory
Are they a Canadian citizen or permanent resident?	Telephone Number	Years in Canada
Yes      No		
Yes      No		
Yes      No		
Yes      No		
Yes      No		
Yes      No		

## Section F – Education

What is the highest level of education you have successfully completed? \_\_\_\_\_

Provide the number of years of school you successfully completed for each of the following levels of education.

Elementary/primary \_\_\_\_\_

Secondary/high school \_\_\_\_\_

Memorial University of Newfoundland \_\_\_\_\_

College of the North Atlantic \_\_\_\_\_

Give full details of all the secondary and post-secondary education (including university, college and apprenticeship training) you have had.

Duration (MM/YYYY)	Education Information	Location
From	Name of Institution	City
To	Course, degree, certificate or apprenticeship activity	Country

Have you received a scholarship or award that requires you to return to your home country following the completion of your degree?

Yes                      No

If yes, have you satisfied the terms of this scholarship or award?

Yes                      No

## Section G – Current Business Information

Only the principal applicant must complete this section. If you are an associated partner seeking permanent residency through the proposed business, please indicate the name of the principal applicant associated with your business.

\_\_\_\_\_

### Type of business

Start-up

Business Succession

### Business Information

Name of Company (enter full legal name if a corporation): \_\_\_\_\_

Operating Name: \_\_\_\_\_

Canada Revenue Agency Business Number (BN) for tax/payroll purposes: \_\_\_\_\_

Start-up investment Amount (if applicable): \_\_\_\_\_

Business Purchase Price (if applicable): \_\_\_\_\_

Business Website: \_\_\_\_\_

### Current Business Address

\_\_\_\_\_

street address

\_\_\_\_\_

city, town

\_\_\_\_\_

province, state or district

\_\_\_\_\_

country

\_\_\_\_\_

postal code

### Current Business Mailing Address

Same as current address?

Yes

No

If no, please provide the following information

\_\_\_\_\_

street address

\_\_\_\_\_

city, town

\_\_\_\_\_

province, state or district

\_\_\_\_\_

country

\_\_\_\_\_

postal code

What is your current position or title in your current business? (Example: owner, partner, manager, etc.)

How many hours per week do you spend managing the business? \_\_\_\_\_  
*hours per week*

How many years have you owned the business? \_\_\_\_\_

What type of business do you own? (Example: manufacturing, exporting, processing)

How many employees does the company currently have? \_\_\_\_\_

How many employees do you manage? \_\_\_\_\_

What are the total company assets? \_\_\_\_\_

What is your level of decision-making ability in the business? \_\_\_\_\_

Industry/Sector:      Aerospace  
                             Agri-food/seafood  
                             Biotechnology  
                             Culture  
                             Energy  
                             Forestry  
                             Information and communications technologies  
                             Manufacturing  
                             Mining/materials  
                             Oceans technology  
                             Retail/services  
                             Tourism  
                             Other (please specify): \_\_\_\_\_

**Type of ownership**

Sole Proprietorship

Partnership

Corporation

Please provide the ownership breakdown.

Name of Owner	Percentage of Ownership (%)

Please describe any capital asset purchases (e.g., machinery and equipment).

Please provide a detailed description of the products/services your company offers its customers.

Please describe your inventory by type (e.g., finalized products, raw materials, etc).

Please provide a list of your business' major suppliers.

Name of Supplier	Supplier Contact Person	Phone Number for Contact at Supplier

Please provide a list of your business' major customers (e.g., wholesale or corporate, repeat customers).

Name of Customer	Customer Phone Number



Please provide an itemized list of your expenditures to date, including a short description of the expenditure.

Expenditure Item	Actual Investment (\$CAD)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Please provide a description of any leasehold improvements or renovations to date.

Improvement/Renovation	Investment Amount (\$)

### Human Resource Information

Please provide the following information for each of your employees (attach additional tables/pages(s) if necessary).

Family Name	
Given Name	
Job Title	
Employee Duties	
Date Began (dd/mm/year)	
Hourly Wage	
Hours Worked Per Week	
Immigration Status	

## Section H – Settlement

In your own words, please tell us briefly about your plans to settle in Newfoundland and Labrador and your future here. Statements copied from someone or somewhere else are not acceptable.

### Out-of-Province Travel

Please provide details of all out-of-province travel conducted since submitting your Expression of Interest (EOI).

Destination City	Destination Province/Country	Date Arrived in Destination (dd/mm/year)	Date Departed Destination (dd/mm/year)	Purpose

## Section I – General information

**Note:** Anyone you pay to help you with your application to immigrate into Canada must be a member of one of the following groups:

- the Immigration Consultants of Canada Regulatory Council (ICCRC)
- a Canadian provincial or territorial law society
- the Chambre des notaires du Québec

For more information on who may represent you, visit [www.canada.ca/en/immigration-refugees-citizenship/services/immigration-citizenship-representative/learn-about-representatives.html](http://www.canada.ca/en/immigration-refugees-citizenship/services/immigration-citizenship-representative/learn-about-representatives.html)

### Assistance in completing the application

Did someone help you complete this form?

Yes                      No

If yes, who helped you? (Please name the person.)

Lawyer: \_\_\_\_\_ Employer: \_\_\_\_\_

Immigration consultant: \_\_\_\_\_ Other: \_\_\_\_\_

Did you, or will you, pay this person for their help in preparing this application?

Yes                      No

### How did you learn about the Newfoundland and Labrador Provincial Nominee Program?

Newfoundland and Labrador promotion material                      Immigration Agent

Newfoundland and Labrador Office of Immigration  
and Multiculturalism Website                      Friend

Canadian Visa Office                      Employer

Immigration job fair or event overseas (specify place and date): \_\_\_\_\_

Other (specify): \_\_\_\_\_

## Section J – AUTHORIZATION TO COLLECT AND DISCLOSE INFORMATION AND APPLICANT DECLARATION

I, \_\_\_\_\_  
Principal Applicant – Surname, First Name (Please print)      Date of Birth (dd/mm/yyyy)

And my Dependents:

\_\_\_\_\_  
Spouse/Common Law Partner – Surname, Given Name      Date of Birth (dd/mm/yyyy)

\_\_\_\_\_  
Dependent(s) – Surname, Given Name      Date of Birth (dd/mm/yyyy)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DO HEREBY AUTHORIZE** the designated representatives of:

1. Office of Immigration and Multiculturalism, Government of Newfoundland and Labrador;
2. Immigration, Refugees and Citizenship Canada and Canada Border Services Agency;
3. and/or other person(s) or organizations referenced in my application;

to exchange all personal information contained in my application to the Newfoundland and Labrador Provincial Nominee Program, regarding myself or any dependent member of my family, and to use it in conjunction with any other agency or branch of either government in evaluating my application.

I also authorize this personal information to be shared as required with third parties either within or outside Newfoundland and Labrador for the purpose of assessing my application under the Provincial Nominee Program and promoting my integration into the provincial labour market. I understand that the Government of Newfoundland and Labrador and its agencies 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 records, whether held by a provincial or federal government office. Any information provided to Newfoundland and Labrador will be disclosed only in the manner provided in this Authorization to Disclose Personal Information or as required by the Laws of Canada and of Newfoundland and Labrador.

**I DECLARE that:**

1. I intend to live and reside in Newfoundland and Labrador on a permanent basis;
2. The information I have given in this application is truthful, complete and correct;
3. I understand that any false statements or concealment of a material fact may result in my exclusion from Canada and may be grounds for my prosecution or removal;
4. I understand all the foregoing statements, having had the opportunity to ask for and obtain an explanation of every point that was not clear to me;
5. I understand that the information I have provided is protected under federal and provincial privacy legislations;
6. I have read and understand this declaration.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature of Principal Applicant

## Section K – Declaration

### Declaration of Information

Applicant and spouse or common-law partner and all accompanying dependent family members 19 years or older must initial beside each statement and authorization to acknowledge agreement and then sign at the bottom of the page. Failure to initial each line and sign at the bottom will result in your application being deemed incomplete and it will not be processed.

#### *Initials*

- \_\_\_\_ \_\_\_\_ I intend to live in the Province of Newfoundland and Labrador upon arrival in Canada.
- \_\_\_\_ \_\_\_\_ I understand that the Office of Immigration and Multiculturalism (OIM) or Immigration, Refugees and Citizenship Canada (IRCC) may refuse my application, rescind my nomination or withdraw my Canadian permanent resident visa if I give false information or fail to give information as requested. Any misrepresentation or intentional omission of material information that is relevant to the application will result in me being ineligible to re-apply for nomination for a period of five (5) years.
- \_\_\_\_ \_\_\_\_ I understand that my application will NOT be processed if I fail to provide a complete application or fail to include required forms and credible supporting documentation.
- \_\_\_\_ \_\_\_\_ Program criteria are eligibility minimums. Meeting program criteria does NOT guarantee that my application will be approved.
- \_\_\_\_ \_\_\_\_ I will give OIM my address, phone numbers, and email address no later than 30 days after I have arrived in Canada. I will inform OIM every time I change my address, phone numbers, or email address for 5 years after arriving in Canada. I agree to supply OIM officers with my business' contact information in order to monitor my business for period of up to five (5) years after the date of my business being established. The monitoring of my business will be to ensure program integrity, my continued eligibility for nomination, and to determine the economic significance of my business to Newfoundland and Labrador.
- \_\_\_\_ \_\_\_\_ The business I will establish or purchase in Newfoundland and Labrador, as per this application, complies with all applicable provincial laws and regulations, including, but not limited to the following statutes, as amended from time to time (refer to official versions):
- Labour Standards Act  
<http://assembly.nl.ca/Legislation/sr/statutes/l02.htm>
- Workplace Health, Safety and Compensation Act  
<http://assembly.nl.ca/legislation/sr/statutes/w11.htm>
- Human Rights Act  
<https://www.assembly.nl.ca/Legislation/sr/statutes/h13-1.htm>
- Food Premises Act and Regulations (Food Services Industry Only)  
<http://www.assembly.nl.ca/Legislation/sr/statutes/f21-1.htm>  
<http://www.assembly.nl.ca/Legislation/sr/regulations/rc961022.htm>
- \_\_\_\_ \_\_\_\_ I declare that the information I have given in this application is truthful, complete and correct.



I acknowledge that I have read, understand and agree to this declaration, and that my representative has provided me with a completed application form for review.

\_\_\_\_\_  
Signature of principal applicant

\_\_\_\_\_  
Date (dd/mm/year)

\_\_\_\_\_  
Signature of spouse or common-law partner

\_\_\_\_\_  
Date (dd/mm/year)

\_\_\_\_\_  
Signature of dependent family member 19 years or older

\_\_\_\_\_  
Date (dd/mm/year)

**Please submit completed application to the address below.**

**Office of Immigration and Multiculturalism**

Department of Advanced Education, Skills and Labour  
Government of Newfoundland & Labrador  
P.O. Box 8700, St. John's, NL A1B 4J6  
Canada

Tel: (709) 729-6607

Fax: (709) 729-7381

Email: [pnnp@gov.nl.ca](mailto:pnnp@gov.nl.ca)

[www.nlimmigration.ca](http://www.nlimmigration.ca)