

Please visit our website to ensure that you are using the current version of this form:
www.WelcomeBC.ca/PNP

Reset Form

The personal information on this form is collected by the Province of British Columbia (the "Province") for the purposes of administering, and assessing applications under, the British Columbia Provincial Nominee Program (the "BC PNP"), as authorized by section 8 of the Provincial Immigration Programs Act and under the Freedom of Information and Protection of Privacy Act. If you have any questions about the collection of your personal information, you may contact an Information Officer of the BC PNP by telephone: (604) 775-2227, email: PNPInfo@gov.bc.ca or in person at Suite 450 – 605 Robson Street, Vancouver BC.

- Please complete all sections and required fields. Handwritten forms are not accepted.

| | | | | |
|--|---|---|---|-------------|
| 1. Prospective Employee Information | | | | |
| EMPLOYEE'S FAMILY NAME(S) | | EMPLOYEE'S GIVEN NAME(S) | | |
| | | | | |
| 2. Company / Organization Information ("Employer"): | | | | |
| LEGAL NAME OF COMPANY / ORGANIZATION | | OPERATING NAME (IF DIFFERENT FROM LEGAL NAME) | | |
| | | | | |
| MAILING ADDRESS | CITY/TOWN | PROVINCE/STATE | COUNTRY | POSTAL CODE |
| | | | | |
| BUSINESS ADDRESS (IF DIFFERENT FROM ABOVE) | CITY/TOWN | PROVINCE/STATE | COUNTRY | POSTAL CODE |
| | | | | |
| EMPLOYER CONTACT FAMILY NAME(S) | EMPLOYER CONTACT GIVEN NAME(S) | TITLE | EMPLOYER CONTACT PHONE NUMBER | |
| | | | | |
| EMPLOYER CONTACT EMAIL | COMPANY WEBSITE | NUMBER OF FULL-TIME-EQUIVALENT EMPLOYEES IN B.C. | | |
| | | | | |
| YEAR COMPANY ESTABLISHED IN B.C. | IDENTIFY THE COMPANY'S ECONOMIC SECTOR: | | | |
| | | | | |
| COMPANY LEGAL STRUCTURE: | <input type="checkbox"/> INCORPORATED IN B.C. | <input type="checkbox"/> LIMITED LIABILITY PARTNERSHIP | <input type="checkbox"/> EXTRA-PROVINCIALY REGISTERED IN B.C. (INCLUDES FEDERALLY INCORPORATED COMPANIES) | |
| INCORPORATION / REGISTRATION NUMBER: | | <input type="checkbox"/> OTHER, PLEASE SPECIFY: | | |
| | | | | |
| 3a. Job Offer Information | | | | |
| JOB TITLE | HOURLY WAGE | ANNUAL WAGE | HOURS WORKED PER WEEK | |
| | | | | |
| WORK LOCATION 1 ADDRESS WHERE THE EMPLOYEE WILL BE WORKING | CITY/TOWN | POSTAL CODE | PHONE NUMBER | |
| | | | | |
| WORK LOCATION 2 ADDRESS WHERE THE EMPLOYEE WILL BE WORKING (IF APPLICABLE) | CITY/TOWN | POSTAL CODE | PHONE NUMBER | |
| | | | | |
| 3b. BC PNP Tech - Complete this section if the offered position is an eligible tech occupation: | | | | |
| IS THE JOB OFFER INDETERMINATE (PERMANENT)? | | IF NO, DESCRIBE WHY THE POSITION YOU ARE OFFERING IS NOT AN INDETERMINATE POSITION: | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| IF NO, INDICATE THE EMPLOYMENT END DATE (DD-MMM-YYYY) | | | | |
| | | | | |

3c. Position Details:

Is this a new position? Yes No Is this position covered under a Collective Bargaining Agreement? Yes No If yes, which union?

Number of employees currently working in this occupation and location: Number of current vacancies in this occupation and location:

Number of employees, in this occupation and at this location, whose employment was terminated in the last 12 months: Number of employees in this occupation and location, who are currently laid off:

Are there any language requirements other than English or French for the position? Yes No

If yes, describe why the language is required for the position:

Has the company been refused a Labour Market Impact Assessment for this position, or similar positions, from Service Canada in the last year? Yes No

If yes, explain the reason(s) why Service Canada refused the Labour Market Impact Assessment:

Does the employee meet the necessary B.C. certification, licensing or registration required for the job? Yes No N/A

If yes, describe what certification, licensing or registration they require and provide this evidence at the time of application:
If no, describe how this requirement will shortly be met:

4. Recruitment Summary:

Has active recruitment taken place in Canada for this position? Yes No Total number of applicants for this position: How many days did you formally recruit to fill this position?

Describe the recruitment activities (type, location and duration of advertisements, interviews, etc.) that led to this job offer, including how you first came to know about this applicant. For an applicant already working for you, or for an applicant who was promoted to this position from within your business, please describe the recruitment activities that led to the initial hiring, including how you first came to know about this applicant:

As the employer, the onus is on you to demonstrate that the job offer is bona fide. Provide details regarding why you offered the position to this applicant. If you have offered the applicant a supervisory or management position, provide details regarding what experience the applicant previously obtained that convinced you that the applicant was qualified for the supervisory or management position:

Explain why the recruitment effort was unsuccessful in hiring a Canadian worker:

Eligible employers applying to the BC PNP must be financially sound and have a history of good workplace and business practices, including compliance with all applicable laws and regulations. These include, but are not limited to, the following employment, labour, immigration, health, and safety laws and regulations:

[Employment Standards Act of BC](#)
[Wage Statements](#)
[Payment of Overtime](#)
[Entitlement to Statutory Holidays](#)
[Statutory Holiday Pay](#)
[Entitlement to Vacation](#)
[Vacation Pay](#)
[No Excessive Hours of Work](#)

[Canada Labour Code](#)
[Entitlement to Vacation](#)
[Payment of Wages](#)
[Deductions from Wages](#)
[Hours of Work](#)
[Entitlement to Statutory Holidays](#)

Other important laws and regulations:
[Workers Compensation Act of British Columbia](#)
[Immigration and Refugee Protection Act](#)
[Human Rights Code of British Columbia](#)
[Canadian Human Rights Act](#)

5. EMPLOYER'S DECLARATION:

I declare that I have the legal authority to sign this form on behalf of the Employer and the consent of the company to support this BC PNP application, including any and all requirements of hiring a foreign worker.

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

I understand that in relation to employees' applications to the BC PNP, the Province of British Columbia may collect employees' personal information, both from me and from third parties, and may also use and disclose such personal information, for the purposes outlined in section 8 of the *Provincial Immigration Programs Act*, including for administering the BC PNP and assessing the related BC PNP application(s), or as otherwise authorized under any other applicable legislation.

Effective on the date I submit this form, I provide my authorization and consent as follows:

1. In addition to the purposes listed above, the Province may also use and disclose, both inside and outside of Canada, information about the Employer that it has collected in relation to this BC PNP application for the purposes of:
 - a. ensuring compliance with applicable laws (other than the *Immigration and Refugee Protection Act* (Canada); and
 - b. cooperating with other provinces for the purpose of evaluating the BC PNP and permitting other provinces to evaluate applications to that province's PNP, verifying information provided by me in an application to that province's PNP, and administering the PNP of that province.
2. The Province may collect information about the business and non-identifiable information about the Employer's other employees, from me or from third parties, for the purposes listed in section 1 above.
3. This authorization and consent will not expire.

I am aware of and in compliance with the legislation and regulations pertaining to the Employer operating in B.C.

I understand that employees' applications may be refused if the BC PNP is not satisfied that the Employer is in compliance with the applicable legislation and regulations.

I have read and understood the [British Columbia Provincial Nominee Program Skills Immigration and Express Entry BC Program Guide](#) and all statements contained above. I have asked for and obtained explanations on any points that were not clear to me.

I understand that if I am found by the Director of Provincial Immigration Programs to have made any misrepresentation, false statement and/or concealment of information in this form or in any of my communications with the BC PNP, the BC PNP may decline the employee's application, or if applicable, cancel the employee's nomination. Further, if the Employer is found to have made a misrepresentation, the BC PNP may refuse to accept future applications from applicants that the Employer is supporting for a period of up to 2 years, as per section 5(b) of the *Provincial Immigration Programs Regulation*.

EMPLOYER AUTHORIZED SIGNING OFFICER'S INFORMATION:

| | | |
|----------------|---------------|-------|
| FAMILY NAME(S) | GIVEN NAME(S) | TITLE |
|----------------|---------------|-------|

| |
|---------------------------|
| Date Signed (DD-MMM-YYYY) |
|---------------------------|

 Handwritten Signature of Employer Authorized Signing Officer