

Endorsement Application

ATLANTIC IMMIGRATION PILOT



Employers must receive provincial designation to participate in the Atlantic Immigration Pilot. Once designated, employers must complete this application for endorsement, to be submitted to the Province, for each Foreign National (FN) Principal Applicant under the Atlantic Immigration Pilot. If this endorsement application is approved, the employer will be required to enter an agreement with the province prior to the issuance of any endorsement.

To be considered a complete application for endorsement under the Atlantic Immigration Pilot, the following documents must accompany this application:

- Completed Offer of Employment to a Foreign National form, which includes the signatures of the signing officer for your business and the Foreign National;
- Detailed job description and supporting documents;
- Copies of advertisements and/or other evidence of recruitment for the position; and,
- A completed needs assessment(s), including the resulting individualized settlement plan(s), completed by a designated immigrant settlement service provider organization for each FN Principal Applicant and accompanying family member(s).

Please refer to the Guidelines for Endorsement for information on completing this form.

1. Application Program

Indicate which application program the FN Principal Applicant will be applying under:

- Atlantic International Graduate Program (AIGP)
- Atlantic High-Skilled Program (AHSP)
- Atlantic Intermediate-Skilled Program (AISP)

Please provide evidence of previous work experience (including NOC) in the primary occupation that qualifies the FN Principal Applicant under the above category:

Job Title		NOC	
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2. Position Description

Attach a detailed position description, including roles and responsibilities, and all supporting documents for the position.

3. Recruitment Activities

What activities have you undertaken to recruit for your position (s) over the past 12 months?

Is this a new position? Yes, explain the reason No, explain why it could not be filled

Was the position advertised? Locally Nationally

If so, for how long was it advertised? _____

No, explain why

List the dates and attach copies of published advertisements or other evidence of advertisement:

How did you learn about the Applicant? Check the appropriate box. You may check more than one box.

- | | | |
|---|---|--|
| <input type="checkbox"/> Listing on Provincial job site | <input type="checkbox"/> Immigration Representative | <input type="checkbox"/> Employment recruiter |
| <input type="checkbox"/> Contacted by a family member | <input type="checkbox"/> Educational institution | <input type="checkbox"/> Professional links |
| <input type="checkbox"/> Other employees | <input type="checkbox"/> Lawyer | <input type="checkbox"/> Other (specify below) |

If you used the services of an immigration representative or recruitment agency, complete the following:

Company name Representative

Mailing address, including postal code

(_____) _____
Telephone Email Website

4. Foreign National Information

Name of FN Principal Applicant: _____

Address: _____ City: _____

Province/State: _____ Country: _____

Email: _____ Phone Number: _____

Family status: _____

Accompanying family member(s), relationship to FN Principal Applicant, and age(s):

5. Settlement and Integration

- A. Employers must ensure each FN Principal Applicant and their accompanying family member(s) receives a comprehensive pre-endorsement needs assessment that includes customized information and service referrals.

The pre-endorsement needs assessment is to be completed by a federally – or provincially-funded immigrant settlement service provider organization (from the list attached) and must thoroughly assess and make appropriate referrals, where applicable, for at least the following types of settlement needs:

- Information and Orientation to Life in Canada
- Housing
- Education
- Health Care
- Financial Services
- Language – Evaluation and Learning to CLB 5 or equivalent
- Employment Counselling and Career Development Support
- Connection to Community Services and Recreation
- Connection to Ethno-cultural and/or Faith-based Associations
- Support Services to access Settlement Supports: Childcare; Interpretation and Translation; Transportation; Crisis Counselling; Provision for Disabilities

NOTE: In certain cases, the pre-endorsement needs assessment may determine that the FN Principal Applicant and his/her spouse and dependents, may not be in need of any of the above referrals; where such a determination has been made through the pre-endorsement needs assessment, employers may not be responsible for the above referrals. In particular, this could be the case for foreign nationals who have already been working and living in the province, and have already become sufficiently established to not require any of the above.

Information deemed sensitive by either the immigrant settlement service provider organization or the FN will be removed from the version of the pre-endorsement needs assessment provided to third-party organizations (i.e., employers, provincial/federal government).

- B. Employers, where applicable, must commit to supporting each FN Principal Applicant's and their accompanying family member(s)' access to the services identified in their respective individualized settlement plans. Where necessary, the

employer's obligation will include providing or paying for services that are not otherwise available to the FN Principal Applicant and their family member(s).

NOTE: Individual settlement plans may be adjusted based on additional dialogue between an immigrant settlement service provider organization and the FN following a possible post-arrival needs assessment.

In addition to the above, employers are expected to provide the following settlement supports, as necessary:

- C. Housing: Employers will ensure that the Principal Applicant and their accompanying family member(s) find suitable housing.
- D. Transportation: Employers will provide transportation assistance to the Principal Applicant and their accompanying family member(s) to support their transition into their new community and help them access settlement services. The employer may be required to pay for transportation services.
- E. Language: Employers will promote and encourage access to official language assessment and training for the Principal Applicant and their accompanying family member(s).

In addition, for every Principal Applicant whose first language is neither English nor French *and* whose first official language ability is lower than the Canadian Language Benchmark (CLB) 5 or equivalent in any of the four skills (i.e., listening, speaking, reading and writing), employers must help ensure that, starting within the first three months after landing in Canada under the Pilot, language training support is made available to the newcomer employee. The minimum number of hours of language training support required is 300 or until the newcomer employee can demonstrate that s/he has obtained CLB 5 across the four competencies (i.e., listening, speaking, reading and writing), whichever is less. The employer may be required to provide release time for, facilitate access to, and/or provide or pay for any of the following, as indicated by the settlement plan:

- Language assessment
- Language training classes on or off the worksite
- Federally or provincially-funded language training, such as Immigration, Refugees and Citizenship Canada's (IRCC) Language Instruction for Newcomers to Canada (LINC) / Cours de langue pour les immigrants au Canada (CLIC)
- Online/distance ESL or FSL training
- Other services or programs as indicated by the settlement plan

Attach completed pre-endorsement needs assessment(s) and individualized settlement plan(s) as set out in the Guidelines for Designation and Endorsement.

6. Temporary Work Permit

Do you need the province to issue a Letter of Support for a temporary work permit?

Yes / No

7. Employer Declaration

On behalf of _____ (the “employer”):
(Employer name)

I declare that the employer has a history of good workplace and business practices, and is in current compliance with all applicable laws and regulations, including, but not limited to federal and provincial labour standards legislation, workers compensation legislation, the *Immigration and Refugee Protection Act* and Regulations, human rights legislation, occupational health and safety legislation, trade union legislation and, where applicable, food safety legislation.

I declare that the employer has screened the applicant to the best of its ability and believes he/she is able to fulfill the requirements of the position.

I declare that the employment of the FN Principal Applicant, as described in this application, will not conflict with any bargaining agreements to which the employer is a party, and will not affect the settlement of any labour dispute or the employment of a person involved in such a dispute.

I declare that the employment of the FN Principal Applicant, as described in this application, will not adversely affect employment or training opportunities for Canadian citizens or permanent residents in Nova Scotia.

I declare that the attached job offer and signed contract are bona fide.

I confirm that I have provided confirmation of employment and other relevant documents to demonstrate the employer’s financial ability to honour this employment offer.

I declare that the employer will meet the commitments to settlement outlined in this application form and accompanying documents. Without limiting the generality of the employer’s obligations, the employer will facilitate access to, provide, and/or pay for settlement supports and services for the FN Principal Applicant and accompanying family member(s), as indicated in the settlement plan(s), which accompany this form. I acknowledge that in addition, some settlement supports or services indicated as necessary in the plan may not be available, in which case the employer will provide or pay for the provision of such supports or services.

I acknowledge that where the FN Principal Applicant has applied to the Atlantic Intermediate Skilled (NOC C) class and the application for permanent residency has been refused by the Government of Canada, the employer will bear sole responsibility for costs to return the FN Principal Applicant to his or her country of origin.

I acknowledge that if this application is approved, as a condition prior to the issuance of any endorsement the employer will be required to enter an endorsement agreement with the Government of Nova Scotia confirming the employer’s obligation provide employment to the FN Principal Applicant, to facilitate and provide settlement supports to the FN Principal Applicant and his or her family member(s) as required by the attached settlement plan, to regularly provide information to the Government of Nova Scotia and related matters.

I authorize the Government of Nova Scotia to collect, use, retain, disclose, and destroy personal and business information for the purposes of assessing this application and administering the Atlantic Immigration Pilot, including research, monitoring and evaluation of the program and the employer’s participation in it, and the detection of fraud, criminality, threats to public safety, and other non-compliance with federal or provincial law. This includes disclosure to, collection, retention use and destruction by third parties of personal and business information as authorized by the Government of Nova Scotia for those purposes. If I have any questions about the collection, use, retention, disclosure, or destruction of personal and business information, I may contact the Nova Scotia Office of Immigration.

I authorize the Government of Nova Scotia to research, monitor, and evaluate the Atlantic Immigration Pilot under the authority of the *Freedom of Information and Protection of Privacy Act*, the *Immigration and Refugee Protection Act* and Regulations and other relevant Government of Canada legislation.

I authorize immigration officials with the Government of Nova Scotia to disclose personal and business information to the Government of Canada, and to collect personal and business information from the Government of Canada, as necessary, for the purpose of assessing, verifying information, monitoring and evaluating the Atlantic Immigration Pilot, or in the event of any suspected non-compliance with any provincial or federal law.

I authorize immigration officials with the Government of Nova Scotia to disclose personal and business information to other Canadian provincial and territorial immigration officials, and to collect personal and business information from other Canadian provincial and territorial immigration officials, as necessary, for the purpose of assessing, verifying information, or in the event of any suspected non-compliance with any provincial or federal law.

I authorize the Government of Nova Scotia to contact any person and disclose personal and business information to verify information provided by the employer in this form, the accompanying documents, and in any other aspect of the employer's participation in the Atlantic Immigration Pilot.

I understand that in the event of suspected fraud or non-compliance with provincial or federal legislation, information about the employer may be collected from, used by or disclosed to any federal, provincial, municipal or local authority or any other person, department, agency or organization.

I declare that the information given in this form and the accompanying documents is true, complete and correct. I undertake to immediately inform the Nova Scotia Office of Immigration in writing of any change in any information given in this form or the accompanying documents.

I understand that any false statement or concealment of information may result in, among other things, denial of this application and de-designation of the employer from the Atlantic Immigration Pilot.

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

Signature of Authorized Signing Officer

Title

Date (dd/mm/yyyy)

8. Employee Declaration

I, _____,
(Employee name)

understand everything written in this application. I have asked for and received an explanation for any point not clear to me.

I authorize the Government of Nova Scotia to collect, use, retain, disclose, and destroy personal information about me and my family for the purposes of assessing this application and administering the Atlantic Immigration Pilot, including research, monitoring and evaluation of the program and the employer's and my participation in it. This includes disclosure to, collection, retention use and destruction by third parties of personal information as authorized by the Government of Nova Scotia for those purposes. If I have any questions about the collection, use, retention, disclosure, or destruction of personal information, I may contact the Nova Scotia Office of Immigration.

I authorize the Government of Nova Scotia to research, monitor, and evaluate the Atlantic Immigration Pilot under the authority of the *Freedom of Information and Protection of Privacy Act*, the *Immigration and Refugee Protection Act* and Regulations and other relevant Government of Canada legislation.

I authorize immigration officials with the Government of Nova Scotia to disclose personal information to the Government of Canada, and to collect personal information from the Government of Canada, as necessary, for the purpose of assessing, verifying information, monitoring and evaluating the Atlantic Immigration Pilot, or in the event of any suspected non-compliance with any provincial or federal law.

I authorize immigration officials with the Government of Nova Scotia to disclose personal information to other Canadian provincial and territorial immigration officials, and to collect personal information from other Canadian provincial and territorial immigration officials, as necessary, for the purpose of assessing, verifying information, or in the event of any suspected non-compliance with any provincial or federal law.

I authorize the Government of Nova Scotia to contact any person and disclose personal information to verify information provided in this form, the accompanying documents, and in any other aspect of the employer's or my participation in the Atlantic Immigration Pilot.

I understand that in the event of suspected fraud or non-compliance with provincial or federal legislation, information about me, my family, and the employer may be collected from, used by or disclosed to any federal, provincial, municipal or local authority or any other person, department, agency or organization.

I declare that to my knowledge the information about me and my family included in this form and the accompanying documents, including in Section 4 of this form, is truthful, complete and correct.

I will advise the Nova Scotia Office of Immigration of my residential address, phone number and email address within thirty days of arriving in Canada. I will inform the Nova Scotia Office of Immigration when I change my address, phone number or email address at any time within three years of arriving in Canada.

I acknowledge that I have read, understand and agree to this declaration.

Signature of Employee

Title

Date (dd/mm/yyyy)

9. Submitting the application

Submit completed applications to the address below:

Postal Box Address (Mail)

Atlantic Immigration Pilot
Nova Scotia Office of Immigration
PO Box 1535
Halifax NS B3J 2Y3

Civic Address (In person)

Atlantic Immigration Pilot
Nova Scotia Office of Immigration
1469 Brenton Street
3rd Floor
Halifax NS

10. Questions

Contact the Nova Scotia Office of Immigration by phone at 1 (902) 424-5230 (toll free within Nova Scotia at 1-877-292-9597) or via email at immigration@novascotia.ca if you have any questions.

11. Approvals

Following review of the endorsement application submitted by the employer, _____, for the position to be filled by applicant, _____, Nova Scotia may approve the application. As a condition prior to any endorsement being issued, the employer will be required to enter into an endorsement agreement with the Province. Confirmation of endorsement will be provided by the Province to IRCC. Applicants will be required to cite endorsement number _____ and provide a copy of the endorsement certificate in their application to IRCC.

Name, Provincial Atlantic Strategy Immigration Pilot Official

Signature, Provincial Atlantic Strategy Immigration Pilot Official

Date