



Government of
Saskatchewan

Family Members Category
Application Form

SASKATCHEWAN IMMIGRANT NOMINEE PROGRAM (SINP)

NOTE: This form must be completed and submitted to the SINP with the relevant Citizenship and Immigration Canada (CIC) forms. A complete list of required forms can be found on the following website: <http://www.immigration.gov.sk.ca>

SINP Family Members Eligibility Criteria: <u>Non-Saskatchewan Resident</u>		
The applicant (non-resident of Canada) must meet and supply supporting documentation for the following SIX criteria to be considered under the SINP.	YES	NO
<p>1. I have a signed affidavit of support from one or more family members in Saskatchewan (if more than one please attach a separate sheet):</p> <p>Name of my Supporting Saskatchewan Family member: _____</p> <p>Address: _____</p> <p>Telephone number: _____</p> <p>E-mail: _____</p> <p>The person listed above is my: (please check/circle one):</p> <p> <input type="checkbox"/> Mother / Father <input type="checkbox"/> Aunt/Uncle <input type="checkbox"/> In-law <input type="checkbox"/> Sister / Brother <input type="checkbox"/> Niece / Nephew <input type="checkbox"/> Step <input type="checkbox"/> Daughter / Son <input type="checkbox"/> Grandfather / Grandmother <input type="checkbox"/> First Cousin </p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>2. I have completed post-secondary education, training or apprenticeship and have received a diploma, certificate or degree where the program is at least one-year in length</p> <p>Please check your highest level of education:</p> <p>Trade/Apprenticeship <input type="checkbox"/> Non-university certificate/diploma <input type="checkbox"/> University degree <input type="checkbox"/></p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>3. I have at least one year of work experience in my field of education or training.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>4. I am between the ages of 18 and 49. My date of birth is: (day/month/year) _____</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p>5. I have sufficient English language ability to be employed in Saskatchewan. I have attached one of the following:</p>	<input type="checkbox"/>	<input type="checkbox"/>

<ul style="list-style-type: none"> ▪ SINP 500-8 Affidavit of English Language Ability filled out by my Saskatchewan Employer; OR <ul style="list-style-type: none"> ▪ Education/ training documents that demonstrate I have attended education institutions where the language of instruction was English OR <ul style="list-style-type: none"> ▪ Language testing results that would be equivalent to a score of 6 or greater on the International English Language Testing System (IELTS). 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<p>6. I ;</p> <ul style="list-style-type: none"> ▪ Have a full-time, permanent job offer of employment from an employer in Saskatchewan Note: the offer of full time permanent employment must come from a registered, income generating Saskatchewan business. Live in caregivers are excluded under this category and should refer to the Citizenship and Immigration Canada (CIC) Live-in Caregiver Program—www.cic.gc.ca OR <ul style="list-style-type: none"> ▪ Intend to find work in Saskatchewan and have adequate funds to live in Saskatchewan after arrival (\$10, 000 for principal applicant and \$2,000 for each additional accompanying family member.) This may include funds from the applicant and spouse. [Financial documents <u>must</u> be provided i.e., bank deposits, term deposits etc. and MUST show a history of three months of the balance]. Funds can be in Canadian dollars or an equivalent amount in foreign currency. 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
PERSONAL INFORMATION OF FAMILY [NON-RESIDENT OF CANADA]		
1. a) Surname (family name):	b) Given name(s):	
2. a) Date of birth (day/month/year):	b) Place of birth (city or town):	c) Country of birth:
3. Full name in native language (for example, Arabic, Cyrillic, Korean, Japanese characters or Chinese commercial/telegraphic code)		
4. Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	5. Citizen ship:	
6. a) Mailing address:		c) Applicants duration at this residence (years and months):
b) Address of residence (complete if mailing address is a post office box or different from place of residence):		d) Telephone number:
		e) Facsimile number:
f) E-mail address:		

7. List those who will accompany you to Canada (use a separate sheet if required):

<u>Name Last/Given</u>	<u>Relationship</u>	<u>Date of Birth/Age</u> (day/month/year)
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8. List relatives currently living in Canada (use a separate sheet if required):

<u>Name Last/Given</u>	<u>Relationship</u>	<u>City/Province</u>	<u>Length of Residence</u>
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9. Have you as the principal applicant, or, any of your family members listed in your application for permanent residence in Canada, ever been convicted of, or are you currently charged with, on trial for, or party to a crime or offence, or subject of any criminal proceedings in any country? This includes the Criminal Code (Canada), Food and Drug Act (Canada), the Controlled Drugs and Substances Act (Canada), or any similar legislation in any province, state or country.

YES NO

If your answer to this question is YES, provide details below.

HAVE YOU THE APPLICANT, OR A FAMILY MEMBER ACCOMPANYING YOU PREVIOUSLY APPLIED FOR ADMISSION TO CANADA AS A LANDED IMMIGRANT: Yes No

If yes, please provide:

Immigration office contacted: _____

Date(s) of application: _____

Name(s) of applicant: _____

Category of application: Entrepreneur Self-Employed Independent
 Family Class Provincial Nominee Investor

If Provincial Nominee, indicate Province of application: _____

Have you ever been refused a visa? Yes No

If your answer to this question is YES,
provide details below and attach a copy of the rejection letter you received.

To be completed by the person, firm or organization who assisted you in preparing your application, (if applicable).

Name of person who provided assistance: _____

Name of firm or organization: _____

Address: _____

Signature: _____ Date: _____



**Government of
Saskatchewan**

SASKATCHEWAN IMMIGRANT NOMINEE PROGRAM (SINP)

AUTHORIZATION TO DISCLOSE PERSONAL INFORMATION

- I authorize you to release information from my Saskatchewan Immigrant Nominee Program application to officials of the Government of Canada relating to my application and other government officials as you deem appropriate (i.e. Citizenship and Immigration Canada)
- I authorize the release of employment and educational history to potential employer(s) and to associations and agencies assessing work and educational qualifications.
- I authorize the third party listed on this application to provide the completed form to the Saskatchewan Government and I further authorize this third party and the Government of Saskatchewan to discuss the contents of this form, or additional information of this type, for the purpose described in the application.

Applicant Name (Please Print)

Applicants Signature

Date

DECLARATION OF APPLICANT

- I intend to live and reside in Saskatchewan.
- I declare that the information I have given in this application is truthful, complete and correct.
- 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.
- I understand all the foregoing statements, having asked for and obtained an explanation of every point that was not clear to me.
- I have read and understand the above declaration

Applicant Name (please print)

Applicant Signature

Date