



**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:		
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 related to 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"> • I have an fulltime offer of employment in Saskatchewan, my employer has verified my language required for the employment through the SINP Employer Online Information System; OR • Education/ training documents that demonstrate I have attended education institutions where the language of instruction was English; OR • Internationally recognized language testing results that would be equivalent to a Band Scale 4 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 <p>OR</p> <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 at least three months of the balance that remain stable over the course of application]. 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:		

<p>7. List those who will accompany you to Canada (use a separate sheet if required):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name Last/Given</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Relationship</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Date of Birth/Age</u> (day/month/year)</th> </tr> </thead> <tbody> <tr><td style="border-top: 1px solid black;"> </td><td> </td><td> </td></tr> <tr><td style="border-top: 1px solid black;"> </td><td> </td><td> </td></tr> <tr><td style="border-top: 1px solid black;"> </td><td> </td><td> </td></tr> <tr><td style="border-top: 1px solid black;"> </td><td> </td><td> </td></tr> </tbody> </table>	<u>Name Last/Given</u>	<u>Relationship</u>	<u>Date of Birth/Age</u> (day/month/year)													
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<p>8. List relatives currently living in Canada (use a separate sheet if required):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name Last/Given</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Relationship</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City/Province</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Length of Residence</u></th> </tr> </thead> <tbody> <tr><td style="border-top: 1px solid black;"> </td><td> </td><td> </td><td> </td></tr> <tr><td style="border-top: 1px solid black;"> </td><td> </td><td> </td><td> </td></tr> <tr><td style="border-top: 1px solid black;"> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	<u>Name Last/Given</u>	<u>Relationship</u>	<u>City/Province</u>	<u>Length of Residence</u>												
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<p>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.</p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>If your answer to this question is YES, provide details below.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>																

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: _____

What Class: Business Canadian Experience Family
 Skilled Workers Provincial Nominee Quebec

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**

AUTHORITY TO DISCLOSE PERSONAL INFORMATION

- I authorize the SINP to disclose, as necessary, information collected from this application to officials in the Government of Saskatchewan, including but not limited to any ministries, agencies, boards and commissions, and to officials within the Government of Canada administering immigration, temporary foreign worker or other programs related to permanent residence or temporary residence.
- I authorize my employer(s) to provide details of our employment contract to the SINP and authorize the SINP to collect such information for the purpose of assessing this application.
- I understand the Government of Canada, including but not limited to any ministries, agencies, boards and commissions, may disclose, as necessary, information about me collected under the Immigration and Refugee Protection Act and its Regulations to the SINP.
- I understand the SINP may disclose, as necessary, information collected from this application to a contracted third party for the purpose of verifying and confirming my qualifications and background as per the contract. I understand that the information provided to the third party will be shared with their worksites in the required countries in order to perform this service. I understand that the verification and confirmation from the third party will be used by the SINP to assess this application.
- I understand the SINP and/or a contracted third party may contact previous institutions or employers I have identified to verify my qualifications, background and eligibility for the SINP. This information is collected for the purpose of assessing my SINP application.
- I understand the SINP may use information collected from this application and/or other sources for the purpose of evaluating provincial immigration programs of the Government of Saskatchewan. I also understand the SINP may disclose, as necessary, such information to officials of the Government of Saskatchewan including but not limited to any ministries, agencies, boards and commissions as well as a third party under contract by the SINP to conduct evaluations on behalf of the Government.
- I confirm my understanding of all the previous statements, and have asked for and received an explanation, or language translation if required, of every point that was not clear to me.

Applicant Name (please print)

Applicant Signature

Date

I would like to be contacted with information about settlement programs and services of the Government of Saskatchewan. I understand that a third party may be used to provide information.



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DECLARATION OF APPLICANT

- 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