Employment Information



This form must be completed, dated, and signed by the New Brunswick employer who wishes to support the immigration application of a foreign national through the New Brunswick Provincial Nominee Program (NBPNP).

The foreign national being supported must also date and sign this form before submitting it to Immigration New Brunswick (ImmigrationNB) with their application through the INB portal, or as otherwise instructed.

It is recommended that you complete this form on a computer and sign it electronically. To learn more about the NBPNP, visit GNB.CA/Immigration.

Section 1: Foreign national

Provide information about the person you have hired, whose immigration application you are supporting.

Hourly wage	Hours worked per	week	Annual salary
Work location's civic address			
Original start date (yyyy-mm-dd)		Current position	start date (yyyy-mm-dd)
Position title		Position NOC cod	e
Date of birth (yyyy-mm-dd)		Passport number	
Family name as shown on passport		Given names as s	nown on passport

NB 1

If the position is paid hourly, use the following formula to calculate the annual salary:

Annual salary = Hourly wage \times Number of hours worked per week \times 52

Section 2: Employer Provide information about your organization. Organization's operating name Organization's legal name Mailing address (including postal code) Civic address (if different from mailing address) **General phone number** Website **New Brunswick's Corporate Registry** reference number New Brunswick's Registry of Employers of Foreign Workers Since September 26, 2022, amendments to Canada's Immigration and Refugee Protection Regulations (IRPR) has made the registration a mandatory requirement. Reference number Registration date (yyyy-mm-dd) Has your organization been actively operating in New Brunswick for at least 24 months in a row? You may be asked to provide proof. ☐ Yes □ No Describe the main purpose and activities of your organization if it is the first time you are supporting a foreign national under the NBPNP. If not, write "N/A."

Section 3: Employer's contact person

Provide information about the person whom ImmigrationNB may contact to verify the information on this form and to answer further questions, if any.

Family name	Given names
Position title	
Phone number	Email address
Section 4: Recruitment Provide information about how the foreign national was 4.1 Did you use the services of an immigration reprethe foreign national named in section 1?	·
\square Yes \square No If you answer "yes" to the previous question, provide d section 4.1 empty.	etails below. If you answer "no," leave the remainder of
Company name	Company website
Representative or recruiter	Membership ID
Phone number	Email address

Section 4: Recruitment (continue)

4.2 Was the foreign national recruited to fill a position in a priority occupation during an official recruitment mission organized by the Government of New Brunswick?				
□ Yes	□ No			
If you answ section 4.2	•	vious question, provide def	tails below. If you answer "no," leave the remainder of	
Specify the	priority sector of	the position.		
☐ Skilled tr	ades	□ Health	☐ Education	
Mission de	stination		Mission date(s)	
Name of th	ne contact person	from the Government of N	lew Brunswick	
Immigration	nNB may contact yo	ou for addition proof of havi	ng participated in the said mission.	
	•	the foreign national nam the employment of this fo	ed in section 1? Is there any additional information reign national?	
Soction	E. Confirma	tion of support		
		t ion of support ng this immigration applicati	on.	
_				
Support me	eans that you have a lal (working and reg	_	s foreign national? named in section 1 a full-time (at least 30 hours a week), bb in New Brunswick. If you answer "no," the application	
□ Yes	□ No			

Section 5: Confirmation of support (continue)

Are you willing to pay a compliance fee of \$230 and submit an offer of employment via IRCC's <u>Employer</u> <u>Portal</u> to help the foreign national obtain a work permit if necessary?

This fee is your sole responsibility and cannot be recovered from the foreign national in any way. If you answer "no," and the foreign national cannot obtain a work permit by any other means, the application will be refused. More information about the compliance fee and work permit can be found here.

\[
\text{Ves} \quad \text{No} \]

Section 6: Declaration & signatures

6.1: Employer

I declare that

- the information provided in this form is truthful, complete, and accurate;
- I understand that the foreign national's application will be refused if I have misrepresented any of the information provided;
- the job offer does not conflict with any existing collective bargaining agreement;
- there is no labour dispute in progress;
- I will notify ImmigrationNB if the foreign national named in section 1 leaves my organization prior to obtaining permanent residence by sending an email to nbpnp-pcnb@gnb.ca.

Signature of authorized person	Title of authorized person
Name of authorized person	Date (yyyy-mm-dd)
6.2: Foreign national	
Signature	Title
Name	Date (yyyy-mm-dd)