

JOB OFFER FORM

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

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.

• All fields are required unless otherwise noted. Complete all sections to the best of your ability. Handwritten forms will not be accepted.

1. Prospective Employee Inform	ation						
EMPLOYEE'S FAMILY NAME(S)			EMPLOYEE'S GIVEN NAME(S)				
2. Company / Organization Info	rmation ("Employer"):						
LEGAL NAME OF COMPANY / ORGANIZATION			OPERATING NAME (IF DIFFERENT FROM LEGAL NAME)				
MAILING ADDRESS		CITY/TOW	N	PROVINCE/STATE	COUNTRY	POSTAL CODE	
RUSINESS ADDRESS (IF DIEFERENT FROM ABOVE)		CITY/TOW	N I	PROVINCE/STATE	COUNTRY	POSTAL CODE	
BUSINESS ADDRESS (IF DIFFERENT FROM ABOVE)		CITITION	,	THOVINCE/SIME	COOMINI	1 OSINE CODE	
EMDLOVED CONTACT FAMILY NAME(S)	EMPLOYER CONTACT GIVEN NAM	AE(S)	TITLE		EMPLOY	ER CONTACT PHONE NUMBER	
EMPLOYER CONTACT FAMILY NAME(S)	EMPLOTER CONTACT GIVEN NAM	/IE(3)	IIILE		EIMIPLOT	ER CONTACT PHONE NOWIBER	
EMPLOYER CONTACT EMAIL COMPANY WEBSITE		Έ	NUMBER OF FULL-TIME-EQUIVALENT EMPLOYEES IN B.C.				
YEAR COMPANY ESTABLISHED IN B.C.	<u>"</u>			<u>II.</u>			
	IDENTIFY THE COMPANY'S EC	CONOMIC SECTOR	2:				
COMPANY LEGAL STRUCTURE:	INCORPORATED IN B.C.	LIMITED LIABILI	TY PARTNERSHIP		ROVINCIALLY REGISTERI ES FEDERALLY INCORPO		
INCORPORATION / REGISTRATION NUMBER:			OTHER, PLEASE SPECI	FY:			
3a. Job Offer Information							
JOB TITLE			/AGE	ANNUAL WAGE	HOURS WO	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 Pilot - Complet	e this section if the offe	red positio	on is an eligi	ble tech occupat	tion:		
IS THE JOB OFFER INDETERMINATE (PERMANENT)?	IF NO, DESCRIBE WHY THE POSIT	ION YOU ARE OFF	ERING IS NOT AN IND	ETERMINATE POSITION:			
Yes No							
IF NO, INDICATE THE EMPLOYMENT END DATE (DD-MM)	M-YYYY)						



3c. Position Details:
Is this a new position? Yes No Is this position covered under new position? Yes No If yes, which union?
Number of employees currently working in this occupation in B.C.: Number of current vacancies in this occupation in B.C.:
Number of employees, in the same occupation and at this location, whose employment was terminated due to lack of work in the last 12 months: Number of employees temporarily laid off in this occupation, in B.C., in the last 12 months
Are there any language requirements other than English or French for the position?
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?
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?
4. Recruitment Summary:
Has active recruitment taken place in Canada for this position? 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

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:

No Excessive Hours of Work

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-identifable 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 the 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
	<u> </u>	Date Signed (DD-MMM-YYYY)
Handuwittan Cignatura o	f Employer Authorized Signing Officer	