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# Application for Provincial Nomination

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To be completed  
by a Candidate selected  
by their Employer  
as a Skilled Worker,  
International Graduate,  
or Semi-Skilled Worker

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**If you need further help, please contact  
the Alberta Foreign Worker Hotline:**

**Toll-free in Alberta:** 1-877-427-6419  
**Telephone:** (Canada 001) (780) 427-6419  
**Email:** [pnp.info@gov.ab.ca](mailto:pnp.info@gov.ab.ca)

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## Application for Provincial Nomination Overview

### Overview of Application for Provincial Nomination

In this booklet, you refers to the candidate. The booklet provides instructions (pages ii-iii) to help you fill out the application form (pages 1-6). You use the *Application for Provincial Nomination* (ABPNP 003) to apply to the Alberta Provincial Nominee Program (PNP) for a PNP Nomination. The form asks for information about you, your family members, and your qualifications.

The Government of Alberta, with Citizenship and Immigration Canada (CIC), operate the Alberta PNP. You must attach all required supporting documents to your application to be considered for a PNP Nomination and faster processing of an application for permanent residence.

### Skilled Worker Category

If you are applying as a Skilled Worker or an International Graduate, you must, with your Alberta employer, complete and submit the *Employer and Worker Application for a Skilled Occupation* (ABPNP 005). Once you have completed that application with all required supporting documents, you may complete and submit this application. Please review the table of steps on the *Employer and Worker Application for a Skilled Occupation* for more information.

### Semi-Skilled Worker Category

If you are applying as a Semi-Skilled Worker, your Alberta employer must first apply to the Alberta PNP using the *Employer Application – Semi-Skilled Worker Category* (ABPNP 001). You must also, with your Alberta employer, complete and submit the *Employer and Worker Application for a Semi-Skilled Occupation* (ABPNP 002). Once those applications are completed with all required supporting documents, you may complete and submit this application. Please review the table of steps on the *Employer Application – Semi-Skilled Worker Category* or the *Employer and Worker Application for a Semi-Skilled Occupation* for more information.

**Our office processes applications in the order we receive them. Processing times depend on the number of applications we receive. Applications that provide sufficient supporting documents allow us to assess your request promptly. Incomplete applications delay our ability to provide a final decision. Notify the Alberta PNP promptly of any changes to the information you have provided.**

## Application for Provincial Nomination Instructions Checklist

### Eligibility

**Are you eligible for this program? You must be able to check (☑) one of the first two items listed below. You must also be able to check (☑) the third item listed below.**

- If I am applying under the **Skilled Worker Category**, the *Employer and Worker Application for a Skilled Occupation* (ABPNP 005) has been completed.
- If I am applying under the **Semi-Skilled Worker Category**, the *Employer Application – Semi-Skilled Worker Category* (ABPNP 001) and the *Employer and Worker Application for a Semi-Skilled Occupation* (ABPNP 002) have been completed.
- I meet the qualifications required to do the job in accordance with the company’s job description and provincial and industry standards, and I am able to provide the required evidence that I meet these qualifications to the Alberta PNP.

**When applicable, check (☑) each item below to help you complete the application and provide all required supporting documents.**

### Forms Required

Review **Eligibility** (above) to make sure that any previous forms required have been completed.

- A complete *Application for Provincial Nomination* (ABPNP 003).

### Completing the Application for Provincial Nomination

- Make sure you answer or acknowledge each question in the application. If any questions do not apply, write **N/A** (Not Applicable).
- Provide original authorizations (signatures) on the application. Section H (pages 4-5) and Section I, if applicable (page 6), require original signatures.

### Supporting Documents Required

- A certified copy of the valid passport for you and your accompanying family members. Include only the personal information page and any page(s) showing the expiry and renewal date(s) of the passport.
- A certified copy of Degree(s), Diploma(s), Certificate(s) and Licence(s) required by the employer, and by provincial, industry or association standards, to do the job.
- Work related reference letters relevant to the job.

*If documents are not in English, provide a certified translation with a copy of the original document(s). If you need to find a certified translator in Alberta, please visit the website of the Association of Translators and Interpreters of Alberta (ATIA) at: <http://www.atia.ab.ca>.*

## Application for Provincial Nomination Instructions Checklist

<b>Citizenship and Immigration Canada (CIC) Forms Required</b>			
<input type="checkbox"/> The Alberta PNP requires a <b>photocopy</b> of the following completed application forms from CIC to issue a PNP Nomination:			
	<b>Principal Applicant (Candidate)</b>	<b>Spouse/ Common-Law Partner</b>	<b>Dependent Child, (18 Years of Age or Older)</b>
<b>Application Forms</b>	<input type="checkbox"/> IMM 0008 Generic  <input type="checkbox"/> IMM 0008 <i>Schedule 1</i>  <input type="checkbox"/> IMM 0008 <i>Schedule 4</i>  <input type="checkbox"/> IMM 5406  <input type="checkbox"/> IMM 5476 (If Applicable)	<input type="checkbox"/> IMM 0008 <i>Schedule 1</i>    <input type="checkbox"/> IMM 5406	<input type="checkbox"/> IMM 0008 <i>Schedule 1</i>    <input type="checkbox"/> IMM 5406  <input type="checkbox"/> IMM 5476 (If Applicable)
<p><b>Do not leave any chronological gaps (on the <i>IMM 0008 – Schedule 1</i>) between the dates listed on Personal History or Addresses. Make sure you complete all fields for all required forms.</b></p> <p>Write <b>N/A</b> (Not Applicable) if a question does not apply.</p>			

<b>Contact Information</b>
<p><b>Mail your application and attachments to:</b>            Alberta Provincial Nominee Program            Alberta Employment, Immigration and Industry            Suite 940, Telus Plaza North Tower            10025 Jasper Avenue            Edmonton, AB T5J 1S6</p> <p><b>Contact the Alberta Foreign Worker Hotline for further information:</b>            Toll-free in Alberta: 1-877-427-6419            Telephone: (Canada 001) (780) 427-6419            E-mail: <a href="mailto:pnp.info@gov.ab.ca">pnp.info@gov.ab.ca</a></p>

## Application for Provincial Nomination (ABPNP 003)

The personal information provided on this form and attachments is collected under the authority of the *Government Organization Act* (RSA 2000) and managed in accordance with the *Freedom of Information and Protection of Privacy Act* (RSA 2000). The information will be used for the purpose of administering the Alberta Provincial Nominee Program. If you have any questions about the collection of this information, you can contact the Provincial Nominee Program (PNP), Alberta Employment, Immigration and Industry, Suite 940, Telus Plaza North Tower, 10025 Jasper Avenue, Edmonton, Alberta, Canada, T5J 1S6. Telephone (toll-free in Alberta): 1-877-427-6419. Telephone: (780) 427-6419. Fax: (780) 427-6560. Email: [pnp.info@gov.ab.ca](mailto:pnp.info@gov.ab.ca).

<b>A. Personal Information</b>		<b>File Number (Office Use):</b>	
1. Candidate's Family Name:	2. Candidate's Given Name(s):		
3. Candidate's Address:	4. City/Town, Province:	5. Postal Code:	
6. Candidate's Mailing Address ( <i>If different from above</i> ):			
7. Candidate's Phone:	8. Candidate's Fax:	9. Candidate's E-mail:	
10. Date of Birth (Day/Month/Year):	11. Place of Birth (City or Town):	12. Country of Birth:	
13. Country of Citizenship:	14. Country of Last Permanent Residence:	15. Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	

<b>B. Citizenship and Immigration Canada (CIC) Application History</b>	
1. Have you, your spouse or common-law partner, or any of your dependent children, <b>already</b> submitted an <i>Application for Permanent Residence in Canada</i> to Citizenship and Immigration Canada (CIC)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. If yes, please provide a response to each of the following:	
a.) CIC (Visa Office) to which application for permanent residence was already submitted:	
b.) CIC File Number:	
c.) Date Application Submitted:	
d.) Status of Application:	
e.) Name of Applicant(s):	
f.) Intended Province of Residence:	
g.) Class or Category of Application:	

## Application for Provincial Nomination (ABPNP 003)

### C. Occupation and Education

1. Current Job Title:	2. Current Exact Salary:	3. Name of Employer:
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4. Education History:

a.) Total years of education: \_\_\_\_\_

b.) Level of education successfully completed:

<input type="checkbox"/> Doctorate / PhD	<input type="checkbox"/> Diploma or Certificate from a Technical School or College
<input type="checkbox"/> Master's Degree	<input type="checkbox"/> Secondary School
<input type="checkbox"/> Bachelor's Degree	<input type="checkbox"/> No Formal Education

5. Industry and Association standards required and obtained:

- Journeyperson Certification
- College of Physicians and Surgeons of Alberta
- College and Association of Registered Nurses of Alberta (CARNA)
- Association of Professional Engineers, Geologists, and Geophysicists of Alberta (APEGGA)
- emerit* Professional Certification
- Certification in Workplace Hazardous Materials Information System (WHMIS)
- Other standards required and obtained (*specify*):

6. Work History:

a.) Total years of employment: \_\_\_\_\_

b.) List all employment since age 18 that is relevant to the job under which you are submitting this application (*attach a separate sheet if required*):

Dates (From - To)	Name of Employer	Occupation	City and Country
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

7. Language Ability

<b>English:</b>	Reading	Speaking	Writing	<b>French:</b>	Reading	Speaking	Writing
High	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	High	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moderate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Moderate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Basic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Native Language:	9. What other languages do you speak?
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### D. Accompanying Family Members

1. List all dependents who intend to **accompany** you to Canada  
(Do not include Canadian Citizens or Permanent Residents):

	Spouse or Common-Law Partner	Dependent 1	Dependent 2	Dependent 3	Dependent 4
Family Name					
Given Name					
Date of Birth	(dd/mm/yyyy)	(dd/mm/yyyy)	(dd/mm/yyyy)	(dd/mm/yyyy)	(dd/mm/yyyy)
Gender	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F

2. Spouse's or Common-Law Partner's Current Job:	3. Number of years Spouse or Common-Law Partner has worked in Canada:
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4. Spouse or Common-Law Partner's Education History:

a.) Total years of spouse's, or common-law partner's, education: \_\_\_\_\_

b.) Level of education spouse or common-law partner has successfully completed:

<input type="checkbox"/> Doctorate / PhD	<input type="checkbox"/> Diploma or Certificate from a Technical School or College
<input type="checkbox"/> Master's Degree	<input type="checkbox"/> Secondary School
<input type="checkbox"/> Bachelor's Degree	<input type="checkbox"/> No Formal Education

### E. Canada/Alberta Background

1. List your or your spouse's or common-law partner's relatives in Canadian Provinces or Territories  
(Provide attachment if required):

Name of Relative	Relationship	City or Town and Province	Years Spent in Canada
_____	_____	_____	_____

2. List any visits made to Canada, where you had entered Canada and departed, before submitting this application (Provide attachment if required):

Reason for Visit	Province Visited	Month/Year Entered	Month/Year Departed
_____	_____	_____	_____

### F. Alberta Provincial Nominee Program Marketing

1. How did you learn about the Alberta PNP? (Check all that apply)

<input type="checkbox"/> Alberta Promotional Material	<input type="checkbox"/> How To Hire Foreign Workers Seminar
<input type="checkbox"/> Provincial Nominee Program Website	<input type="checkbox"/> Canada Alberta Service Centre
<input type="checkbox"/> Industry or Association	<input type="checkbox"/> Other (specify): _____

## Application for Provincial Nomination (ABPNP 003)

### G. Program Evaluation

In order to determine the effectiveness of the Alberta PNP, we will be contacting you in the future to see if this program was helpful to you.

In the event that we are unable to reach you at the contact information you provided in this application, we are asking that you provide the name of a contact person, who is not living with you, that we may contact. This person would only be asked to provide your current telephone number and address in the event that we are unable to reach you.

We recommend that you advise this person that you have given our office permission to contact him or her if we are unable to reach you. You may remove or change the name of this contact person at any time by contacting our office.

Name of Contact Person:

Phone Number of Contact Person:

### H. Authorization Candidate's Declaration

By signing and submitting this form, I confirm that:

1. The information I have provided in this application is true, complete and correct and I, the candidate, have personally provided it.
2. I understand that submitting an *Application for Permanent Residence in Canada* to Citizenship and Immigration Canada on the basis of an Alberta Provincial Nominee Program (PNP) Certificate issued by the Government of Alberta, is subject to federal requirements. Specifically, my application for permanent residence is subject to the statutory requirements for admissibility under the *Immigration and Refugee Protection Act* and its Regulations, and the Certificate and application do not guarantee that I will be granted permanent residence in Canada.
3. I understand that the Alberta PNP may decline this application or withdraw approval for a PNP Nomination:
  - a. If I have submitted any false statements or concealed a relevant or significant fact. Both constitute misrepresentation;
  - b. If there is any change to my employment status as an indeterminate or permanent full-time employee;
  - c. If I do not comply with any request for information required by the Alberta PNP to effectively administer and maintain the integrity of the program; or,
  - d. For reasons other than the preceding statements. As a result of this decline or withdrawal, the Alberta PNP may refuse to consider me as a candidate for a PNP Nomination for an unspecified period.
4. I understand all of the above statements, and have asked for and received an explanation, or language translation if required, of every point that was not clear to me.

**Continued . . .**

## Application for Provincial Nomination (ABPNP 003)

### H. Authorization (Continued from Page 4 of the *Application for Provincial Nomination*) Candidate's Authorization to Collect and Disclose Personal Information

By signing and submitting this form:

1. I authorize the Alberta PNP to disclose, as necessary, personal information about me collected from my application under the program, to officials in the Government of Alberta, including but not limited to partner ministries, and to officials administering immigration programs within the Government of Canada.
2. I authorize the Government of Canada to disclose, as necessary, personal information about me collected under the *Immigration and Refugee Protection Act* and its Regulations to officials administering the Alberta PNP. I also authorize the Alberta PNP to collect such information.
3. I authorize the Alberta PNP to disclose to my employer information on the status of my application under the Alberta PNP at any time throughout the process, and I authorize my employer to collect this information.
4. I authorize my employer to provide details of our employment contract to the Alberta PNP and authorize the Alberta PNP to collect such information.
5. 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.
6. I consent to be contacted to complete a brief questionnaire to evaluate the program.

Candidate's Name (Print):	Signature (Candidate):
Spouse's or Common-Law Partner's Name (Print):	Signature (Spouse or Common-Law Partner):
Dependent Child's Name, 18 Years of Age or Older (Print):	Signature (Dependent Child, 18 Years of Age or Older):
Dependent Child's Name, 18 Years of Age or Older (Print):	Signature (Dependent Child, 18 Years of Age or Older):
Dependent Child's Name, 18 Years of Age or Older (Print):	Signature (Dependent Child, 18 Years of Age or Older):
Dependent Child's Name, 18 Years of Age or Older (Print):	Signature (Dependent Child, 18 Years of Age or Older):

Date (Month, Day, Year): \_\_\_\_\_

## Application for Provincial Nomination (ABPNP 003)

### I. Use of a Representative

**If a representative was used to prepare/submit this form, complete below:**

Type of Representative (*Check all that apply*):

Unpaid     
  Lawyer     
  Immigration Consultant     
  Other (*specify*):  
 CSIC Number:

Name of Firm:		Address:	
Representative's Family Name:		Representative's Given Name:	
Telephone:	Fax:	E-mail:	

Candidate's declaration or declaration of candidate's family members:\*

1. I authorize the person identified above to serve as my representative and to conduct business on my behalf with officials of the Alberta Provincial Nominee Program (PNP).
2. I authorize my representative to provide this completed application and attachments to the Alberta PNP.
3. I authorize my representative and the Alberta PNP to discuss the contents of my application and attachments for the purposes described in this form or, if I am a family member, my personal information contained in this application.
4. I understand all previous statements, and received an explanation on every point about which I may have been uncertain.

Candidate's Signature:	Date:
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Representative's declaration:

1. The information I have provided in Section I is true, complete, and correct.
2. I understand and accept that I am the person appointed by the candidate to conduct business with officials of the Alberta PNP.
3. I understand that this appointment is made in accordance with Section 84 of the Freedom of Information and Protection of Privacy (FOIP) Act.
4. I understand that to the best of my knowledge, the information provided on this form and the supporting documents provided are true, complete and correct. I explained all points that were unclear to the candidate on this application.
5. I understand that the candidate may be contacted directly by officials of the Alberta PNP. I understand that the Alberta PNP accepts the definition of *authorized representative* in accordance with the amended *Immigration and Refugee Protection Regulations* effective April 13, 2004.
6. I understand that by signing this form, I confirm that I am an unpaid representative or a paid representative who is a member in good standing of a provincial bar, the Chambre des notaires du Québec, or the Canadian Society of Immigration Consultants (CSIC).

Representative's Signature:	Date:
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\* Please note that this page should be completed separately for each dependent who is 18 years of age or older to authorize the Alberta PNP to conduct business with their representative.