

4. Employment History (last 5 years including current employment)

Name of Institution	Date Started YY/MM/DD	Date Ended YY/MM/DD	City/Country	Position
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		
	/ /	/ /		

5. Language Proficiency

Do you use English or French in the Workplace?	<input type="radio"/> English	<input type="radio"/> French
Have you used English as the primary language of communication at school?	<input type="radio"/> NO	<input type="radio"/> YES
Have you studied English as a foreign language or as a second language?	<input type="radio"/> NO	<input type="radio"/> YES

6. Language Test Results (if applicable)

Which test did you take?	<input type="radio"/> IELTS	<input type="radio"/> CELPIP	<input type="radio"/> TEF	Date of test - YY/MM/DD:	/ /
Please Indicate your scores in each category:	Listening	Writing	Reading	Speaking	

7. Family Information

List your immediate family members. Include spouse or common-law partner, and any dependent children (19 years-old and under).

Name:	Passport Number:	Country of Birth:
Date of Birth - YY/MM/DD / /	Gender: <input type="radio"/> Female <input type="radio"/> Male	Relationship to you: <input type="radio"/> Spouse <input type="radio"/> Son <input type="radio"/> Daughter <input type="radio"/> Other: _____
Name:	Passport Number:	Country of Birth:
Date of Birth - YY/MM/DD / /	Gender: <input type="radio"/> Female <input type="radio"/> Male	Relationship to you: <input type="radio"/> Spouse <input type="radio"/> Son <input type="radio"/> Daughter <input type="radio"/> Other: _____
Name:	Passport Number:	Country of Birth:
Date of Birth - YY/MM/DD / /	Gender: <input type="radio"/> Female <input type="radio"/> Male	Relationship to you: <input type="radio"/> Spouse <input type="radio"/> Son <input type="radio"/> Daughter <input type="radio"/> Other: _____
Name:	Passport Number:	Country of Birth:
Date of Birth - YY/MM/DD / /	Gender: <input type="radio"/> Female <input type="radio"/> Male	Relationship to you: <input type="radio"/> Spouse <input type="radio"/> Son <input type="radio"/> Daughter <input type="radio"/> Other: _____
Name:	Passport Number:	Country of Birth:
Date of Birth - YY/MM/DD / /	Gender: <input type="radio"/> Female <input type="radio"/> Male	Relationship to you: <input type="radio"/> Spouse <input type="radio"/> Son <input type="radio"/> Daughter <input type="radio"/> Other: _____

8. Nominee Applicant Declaration

This information is collected under the Northwest Territories *Access to Information and Protection of Privacy Act* section 40(c), will be used in the processing of my application, and will be protected by the privacy provisions of that Act. Applicants have the right to examine and request correction of their records, and to request a review by the Information and Privacy Commissioner. If you have any questions about the collection of information, please contact the Coordinator, Immigration at 1-855-440-5450.

I authorize the Government of the Northwest Territories to share information relating to my/our application with Citizenship and Immigration Canada and any other federal/provincial/territorial departments and their agencies, as well as municipal governments, unions and associations and other appropriate organizations as deemed appropriate by the Government of the Northwest Territories for the purposes of administering the program, including the verification and processing of my/our application and for the purposes of program evaluation.

I declare that:

- I intend to live in the Northwest Territories on a permanent basis.
- I intend to accept the employment opportunity identified in this application.
- I agree to sign a Memorandum of Understanding that outlines my responsibilities under the Nominee Program.
- 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 the Nominee Program and may be grounds for my prosecution and removal from Canada.
- I understand all the foregoing statements, having asked for, and obtained, an explanation for any point which was not clear to me.
- I am not a Refugee Claimant.

X

Nominee's Signature (Mandatory)

/ /

Date - YY/MM/DD

X

Signature of spouse or common-law partner (Mandatory)

/ /

Date - YY/MM/DD

X

Dependent children over 18 years of age (Mandatory)

/ /

Date - YY/MM/DD

How did you hear about this program?

- | | |
|------------------------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Employer | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Career Development Officer | <input type="checkbox"/> Union |
| <input type="checkbox"/> Consulate/High Commission | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Visa/Immigration Official | <input type="checkbox"/> Poster |
| <input type="checkbox"/> Government of Canada Website | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Website (other): _____ | <input type="checkbox"/> Family/Friends |
| <input type="checkbox"/> Multicultural Centre | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Educational Institution (college, university) | |
| <input type="checkbox"/> Employment Centre | |