

Office of Immigration

Office of Immigration 94 Euston Street, 2nd Floor PO Box 1176 Charlottetown, Prince Edward Island

Telephone: 902 620 3628 Facsimile: 902 368 5886

Email: immigratepei@gov.pe.ca Website: immigratepei.ca Canada C1A 7M8

BUSINESS IMPACT APPLICATION FORM							
1. Application Stream: Work Permit Stream	ım						
2. Applicant Information							
Last name							
First name							
Date of Birth (d/m/y)							
		Female Male					
Address							
(include country)							
Telephone		Facsimile					
Email							
Country of citizenship		Country of residence					
,		•					
Have you ever lived, worked or studied in Canada? You	es No If yes	explain					
Are you using an Island agent? Yes No No	f yes, please name the Isla	and Agent					
Have you received help in the preparation of your application? Yes No If yes, explain							
The state of the s							
3. Please list everyone you have paid or have contracted to pay to help you in preparation of your application.							
Corporate name and individual (ICCRC number if		es provided	Amount paid				
applicable)							

4. Immigration Application History – Provide information on all previous immigration applications to Canada for you and/or your spouse, if applicable.							
Program type - FEDERAL/PNP	File number	Result		Embassy/Province		Date of result (d/m/y)	Destination in Canada
5. Previous Visits to Canada – Describe all previous stays in Canada by the applicant, spouse and/or dependent child and provide supporting documents, if applicable.							
Name			Arrival	Arrival (d/m/y) - Departure (d/m/y		Reason for travel	
6. Relatives in Canad						No If yes, explai	
Relatives name	City & Province	e Statu	s in Can	ada	Relatio	nship with applicant	Date of arrival (d/m/y)
7. Interview with the	Office of Immigra	tion					
In which language would you prefer to be interviewed in English or French?							
English French							
If you are unable to be interviewed in English or French, you are responsible for bringing your own interpreter.							
8. Contact Information for business you are purchasing, if applicable							
Company name							
Contact person							
Address							
Telephone				Facsimile			
Email							

How did you fin	d out about the I	PEI PNP?						
Employer		Associate/friend/family mem	nber	Lawyer/agent/recruiter/consultant				
Educational institution		Advertisement/listing on into	ernet	Business/profession/trade link/group				
Immigration mission/fair by P	PEI	Immigration mission/fair by	business	Advertisement/listing newspaper/magazine/radio/TV				
Other If yes, explain								
10. How did you find the business you are purchasing, if applicable?								
Contacted direct by the Empl	oyer	Associate/friend/family mem	nber	Lawyer/agent/recruiter/consultant				
Educational institution		Advertisement/listing on inte	ernet	Business/profession/trade link/group				
Immigration mission/fair by P	PEI	Immigration mission/fair by	business	Advertisement/listing newspaper/magazine/radio/TV				
Other If yes, explain								
11. Why did you choo	se PEI?							
Processing time		Quality education		Quality health				
Quality lifestyle		Employment opportunities		Have family/friends living in PEI				
Small Population Size		Other If yes, explain						
12. Application Sign	nature							
 I declare that I ir 	ntend to establish	a residence and reside in Prir	nce Edward Island or	nce arriving with my Work Permit.				
 I declare that I understand that the Province of Prince Edward Island only nominates individuals who have resided in Prince Edward Island along with their dependent family members, and who have established, purchased or invested in a business in Prince Edward Island and have met all conditions of the Work Permit. 								
3. I am aware that non-disclosure, misrepresentation and/or submission of fraudulent documents will lead to immediate decline of this application.								
4. I am aware that only licensed contacts can be paid for immigration advice. Licensed contacts include members of a Canadian Law Association or an ICCRC member.								
5. I am aware that it is against IRPA Regulations that unlicensed contacts be paid for immigration advice and that any violation of this regulation will result in disqualification from participation in the Prince Edward Island Provincial Nominee Program.								
6. I declare that I have completed the application to the best of my ability and that all information provided is correct, true and complete.								
7. I have read and understand all these statements and asked for and received an explanation on every point that was not clear to me.								
Applicant signature			Date (d/m/y)					
	_							
Personal information on this form is collected under section 31 (c) of the Freedom of Information and Protection of Privacy Act R.S.P.E.I. 1988, c. F-15.01 as it relates directly to and is necessary for PEI PNP and will be used for the purpose of immigration and determining eligibility under the program. If you have any questions about this								
collection of personal information, you may contact the Office of Immigration at 94 Euston Street, Charlottetown, Prince Edward Island, C1A 7M8. Telephone: (902) 620-3628 Facsimile: (902) 368-5886 Email: immigratepei@qov.pe.ca Website: immigratepei.ca								