



Government of  
Saskatchewan

Foreign Student Category  
Application Form

**SASKATCHEWAN IMMIGRANT NOMINEE PROGRAM (SINP)**

The Student Category Post Graduation Work Permit Stream requires the following criteria be met before the application will be considered for SINP nomination:

1. I have a Post Graduation Employment Work Permit issued by CIC  Yes  No  
 Authorization Number: BB  
 Date Issued: \_\_\_\_\_ Date of Expiry: \_\_\_\_\_
2. I have a permanent, full-time offer of employment.  Yes  No  
 If yes, please attach an Offer of Employment letter.
3. I have attached education certificates and transcripts  Yes  No  
 which show I have graduated from a Canadian post secondary educational institute  
 study program of at least **one** full-time year of academic study.
4. I have attached English language test results showing equivalent to a minimum of  
 CLB 4 or higher  Yes  No

The Student Category - Master's and PhD Graduate Stream requires the following (3) criteria be met before the application will be considered for SINP nomination:

1. I have attached education certificates and transcripts showing that I have  Yes  No  
 graduated from a University of Saskatchewan or a University of Regina  
 Master's or PhD program of at least **one** full-time year of academic study.
2. I have attached proof that I am applying within two years from the date that  Yes  No  
 my Master's or PhD degree was granted.
3. I intend to live in Saskatchewan and demonstrate my ability to settle and work in  Yes  No  
 Saskatchewan through one of the following:
  - at least six months of employment history in my field of training in Saskatchewan
  - are currently employed in my field of training or have received  
 a job offer in in my filed of training in Saskatchewan for a term longer than six months
  - my spouse has current permanent full-time employment in Saskatchewan
  - have proof of enough money to sustain myself and my family for a short time  
 without work (\$10,000 for you and \$2,000 for each accompanying family member)
4. I have attached English language test results showing equivalent to a minimum of  Yes  No  
 CLB 4 or higher

## PLEASE PRINT OR TYPE APPLICATION

HAVE YOU BEEN ASSISTED IN COMPLETING THIS APPLICATION BY:

A Consultant    A Lawyer    Other \_\_\_\_\_

If so, please provide their NAME and ADDRESS:

HAVE YOU OR A FAMILY MEMBER ACCOMPANYING YOU EVER APPLIED FOR ADMISSION TO CANADA AS AN IMMIGRANT:    Yes    No

If yes, please provide:

Immigration office contacted: \_\_\_\_\_ Date(s)

of application: \_\_\_\_\_

Name(s) of applicant: \_\_\_\_\_

Category of application:    Entrepreneur    Self-Employed    Skilled Worker  
 Family Class    Provincial Nominee    Investor

If Provincial Nominee indicate province of application: \_\_\_\_\_

Have you ever been refused a visa?    Yes    No

<b>PERSONAL INFORMATION</b>			
1. a) Surname (family name):		b) Given name(s):	
c) Full name in native language (for example, Arabic, Cyrillic, Korean, Japanese characters or Chinese commercial/telegraphic code) is:			
2. a) Date of birth (day/month/year):	b) Place of birth (city or town):	c) Country of birth:	
3. Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		4. Citizenship:	
5. a) Mailing address:		b) Duration at this residence (years and months):	
c) Address of residence (complete if mailing address is a post office box or different from place of residence):		d) Telephone number:	
		e) Facsimile number:	
f) E-mail address:			
6. List those who will accompany the applicant to Canada (use a separate sheet if required):			
<u>Name</u> (provide birth name of spouse)	<u>Relationship</u> (spouse/children)	<u>Date of Birth/Age</u> (day/month/year)	
_____			
_____			
_____			
_____			
6. List relatives currently living in Canada:			
<u>Name</u>	<u>Relationship</u> (spouse/children)	<u>City/Province</u>	<u>Length of Residence</u>
_____			
_____			
_____			
_____			

8. Have you as the principal applicant, or, any of your family members listed in your application for permanent residence in Canada, ever been convicted of, or are you currently charged with, on trial for, or party to a crime or offence, or subject of any criminal proceedings in any country?

**YES**  **NO**

**If your** answer to this question is YES, provide details below.

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**Government of  
Saskatchewan**

- I authorize the SINP to disclose, as necessary, information collected from this application to officials in the Government of Saskatchewan, including but not limited to any ministries, agencies, boards and commissions, and to officials within the Government of Canada administering immigration, temporary foreign worker or other programs related to permanent residence or temporary residence.
- I authorize my employer(s) to provide details of our employment contract to the SINP and authorize the SINP to collect such information for the purpose of assessing this application.
- I understand the Government of Canada, including but not limited to any ministries, agencies, boards and commissions, may disclose, as necessary, information about me collected under the Immigration and Refugee Protection Act and its Regulations to the SINP.
- I understand the SINP may disclose, as necessary, information collected from this application to a contracted third party for the purpose of verifying and confirming my qualifications and background as per the contract. I understand that the information provided to the third party will be shared with their worksites in the required countries in order to perform this service. I understand that the verification and confirmation from the third party will be used by the SINP to assess this application.
- I understand the SINP and/or a contracted third party may contact previous institutions or employers I have identified to verify my qualifications, background and eligibility for the SINP. This information is collected for the purpose of assessing my SINP application.
- I understand the SINP may use information collected from this application and/or other sources for the purpose of evaluating provincial immigration programs of the Government of Saskatchewan. I also understand the SINP may disclose, as necessary, such information to officials of the Government of Saskatchewan including but not limited to any ministries, agencies, boards and commissions as well as a third party under contract by the SINP to conduct evaluations on behalf of the Government.
- 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.

\_\_\_\_\_  
Applicant Name (please print)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

I would like to be contacted with information about settlement programs and services of the Government of Saskatchewan. I understand that a third party may be used to provide information.

DECLARATION OF APPLICANT

- I declare that 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 Canada and may be grounds for my prosecution or removal.
  - I understand all the foregoing statements, having asked for and obtained an explanation of every point that was not clear to me.
- I have read and understand the above declaration

\_\_\_\_\_  
Applicant Name (please print)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date