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### Government of Saskatchewan Immigration Branch

# Farm Owner/Operator Application

FOR OFFICE USE ONLY	
Office file number:	

#### SASKATCHEWAN IMMIGRANT NOMINEE PROGRAM (SINP)

	rm Owner/Operator Category requires the following (4) criteria must be met prior to the application being ered for SINP nomination:						
1.	. I have attached financial documents that verify a net worth of or exceeding \$500,000 Cdn. 🗌 Yes 🗌 No						
2.	2. I am prepared to sign a Performance Agreement committing me to establishing a farming Yes No operation in Saskatchewan and to putting \$75,000 in trust that will be refunded if I fulfill the terms of the Agreement.						
3.	a) I have visited Saskatchewan in the last 2 years.  Yes No Date of visit: or						
	b) I plan to visit Saskatchewan.						
4.	I have attached documentation (e.g. education, training, work experience, financial/business documents of previous farm operations) that demonstrates I am an experienced farmer.						
NOTE: All potential immigrants age 18 years or older must complete the Citizenship and Immigration Canada IMM0008 SCHEDULE 1 FORM and IMM 5406 FAMILY MEMBER FORM and submit with this application. You can find these forms at the following website: <a href="https://www.cic.gc.ca/english/skilled/provnom/forms.html">www.cic.gc.ca/english/skilled/provnom/forms.html</a>							
PLEAS	E PRINT OR TYPE APPLICATION						
I AM:	The Applicant						
IF YOU ARE NOT THE APPLICANT ARE YOU: A Consultant A Lawyer Other							
NAME	and ADDRESS:						
HAS THE APPLICANT OR A FAMILY MEMBER ACCOMPANYING THE APPLICANT EVER APPLIED FOR ADMISSION							
TO CA	NADA AS AN IMMIGRANT: 🗌 Yes 🗌 No						
If yes, p	please provide:						
	Immigration office contacted:						
	Date(s) of application:						
	Name(s) of applicant:						
	Category of application: Entrepreneur Self-Employed Independent						
	Family Class Provincial Nominee Investor						
	If Provincial Nominee indicate province of application:						
Have you ever been refused a visa?							
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PERSONAL INFORMATION								
1.				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 c	or town):		c) Country of birth:			
3.	3. Sex: Male Female 4. Citizenship:							
5.	5. a) Mailing address:				b) Duration at this residence (years and months):			
c) Address of residence (complete if mailing address is a post offic different from place of residence):			e box or		phone number:			
				e) Facsi	imile number:			
f) I	f) E-mail address:							
6.	List those who will accompany the appli	icant to Canada (use a	separate sheet	if required	d):			
	<u>Name</u> (provide birth name of spouse) <u>Relationship</u> (spouse/children)				Date of Birth/Age (day/month/year)			
7.	List relatives currently living in Canada:	:						
	<u>Name</u>	Relationship (spouse/chi	lldren)	City/Provi	nce Length of Residence			

REQUIRED BUSINESS PLAN INFORMATION TO BE COMPLETED WITH APPLICATION						
	Please describe the farm that you intend to operate? (Number of acres, number of livestock, crop production, estimated annual net income after expenses).					
	Do you intend to expand and diversify your operation over the next few years? Please describe your plans including the					
9.	investment that you will make.					

10.	10. 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.							



## SASKATCHEWAN IMMIGRANT NOMINEE PROGRAM (SINP)

#### AUTHORITY TO DISCLOSE PERSONAL INFORMATION

- I authorize the release of information from my Saskatchewan Immigrant Nominee Program application to officials of the Canadian Government for any purpose relating to my application and other government officials as deemed appropriate.
- I authorize the release of employment and educational history to associations and agencies assessing work and educational qualifications.
- I authorize the third party listed on this application to provide the completed form to the Saskatchewan Government and I further authorize this third party and the Government of Saskatchewan to discuss the contents of this form, or additional information of this type, for the purposes described in the application.

Applicant Name (please print)

Applicant Signature

Date

#### DECLARATION OF APPLICANT

- I intend to live in Saskatchewan and own and operate a farm.
- 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.

Applicant Name (please print)

Applicant Signature