

Self-Employed Farmer Application (AINP 004)

AINP Self-Employed Farmer Stream

The personal information provided on this form is collected under the authority of section 33(c), and managed in accordance with the *Freedom of Information and Protection of Privacy Act*. The information will be used for the purpose of administering the Alberta Immigrant Nominee Program (AINP). If you have any questions about the collection of this information, you can contact the Alberta Immigrant Nominee Program, Suite 940, ATB Place North Tower, 10025 Jasper Avenue, Edmonton, Alberta, Canada, T5J 1S6. Fax: (780) 427-6560. E-mail: ainp.info@gov.ab.ca.

A. Introduction

File number (office use):

Prior to submitting an application, Candidates must first seek an assessment from Alberta Agriculture and Rural Development. Contact Alberta Agriculture and Rural Development, Telephone: (Canada 001) 403-742-7901 Toll-free in Alberta: 310 FARM (310-3276) or 1-866-882-7677.

Once the application is complete and all supporting documents gathered, attach a cover letter and send the application package, including the completed Self-Employed Farmer Document Checklist, to: Alberta Agriculture and Rural Development, J. G. O'Donoghue Building, 200, 7000 - 113 Street, Edmonton, AB T6H 5T6.

B. Candidate's Personal Informat	tion			
Candidate's family name:	Candidate's given name(s	Candidate's gender: ☐ Male ☐ Female		
Candidate's residential address:				
City/Town:	Prov/Terr/State:	Postal code/Zip code: Country:		Country:
Candidate's mailing address: (if differen	t from above)			
City/Town:	Prov/Terr/State:	Postal code/Zip code: Country:		Country:
Candidate's home phone:	Candidate's cell phone:	Candidate's w	vork phone:	Candidate's fax:
Candidate's email:		Candidate's d (mm/dd/yy)	late of birth:	
Language of communication: ☐ English ☐ French	Native Language:		Candidate's place of birth: (city or town)	
Candidate's country of citizenship:	Candidate's country of bir	th: Candidate's intende territory of residence		•

C. Candidat	te's Educati	on					
Total years of	education:						
Level of educa	ation successf	ully completed:	(check all that ap	oply)			
□ Doctorate / PhD □ Diploma (2 years) □ Secondary school □ Master's degree □ Certificate (1 year) □ No formal education □ Bachelor's degree □ Trade Certification/Apprenticeship □ Other:							
Language abil	lity:						
English	Speaking	Reading	Writing	French	Speaking	Reading	Writing
High				High			
Moderate				Moderate			
Basic				Basic			
None				None			
D. Citizensh	nip and Imm	igration Can	ada (CIC) App	olication Hist	tory		
Have you, or a	any of your ac	companying de	ependents, previ	ously submitte	d an Application	on for Permanen	t Residence in
Canada to Cit	izenship and I	mmigration Ca	nada (CIC)?	Yes 🗌 No			
If yes, please	indicate how r	nany previous	applications have	e been submit	ted:		
If yes, please	provide a resp	onse to each o	of the following:				
CIC (Visa Office) to which application was submitted: CIC file number: Date application submitted (mm/dd/yy)							
Status of application: Principal applicant: Intended province of residence:							
Have you ever had an application for Permanent Residence in Canada refused?							
If yes, please provide a brief description of the reasons for the refusal: Provide a photocopy of any correspondence with CIC regarding the previous application(s).							
E. Family M							
List all dependents who intend to accompany you to Canada: (do not include Canadian citizens or permanent residents)							nt residents)
	Fan	Family name Given name Date of birth (mm/dd/yy) Gender					
Spouse or common-law	partner					☐ Mal	
Dependent						☐ Mal ☐ Fen	
Dependent	pendent						
Dependent	☐ Male ☐ Female						

F. Candidate's Spouse/Common-Law Partner's Occupation and Education						
Family name:		Given r	name(s):			
Current job title:						
Education history						
Total years of education	ո:					
Level of education succ	essfully complete	ed: (che	ck all that apply)			
Doctorate / PhD		☐ Dipl	oma (2 years)	Secondary school		
☐ Master's degree		☐ Cert	ificate (1 year)		☐ No formal	education
☐ Bachelor's degree		☐ Trac	le Certification/Apprentic	eship	Other:	
G. Farming History						
Type of current farm:						
Description of primary p	oroduction/seco	ndary pr	oduction (e.g. crops, live	estock) o	f your existing fa	arm:
Type of ownership of your existing farm: (e.g. partnership, sole proprietor)		Please indicate the location and size of your existing farm:		Number of years your existing farm has been in operation:		
Has your existing farm	business been	Has yo	ur farm business been		What is your pl	anned/anticipated date
sold? ☐ Yes ☐ No		advertised for sale? ☐ Yes ☐ No		of immigration? (mm/dd/yy)		
Briefly explain your past responsibilities and experience in farm management: (attach a separate page if required)						
Have you undertaken a If yes, please describe:	•		m organizations or associf required)	ciations?	? ☐ Yes ☐ N	lo
Briefly explain your pas (attach a separate page	•	and exp	perience in non-farm acti	vities, ot	ther training or c	careers prior to farming:
What was your farm's net income for the past 5 years (in Canadian dollars)?						
Year 1	Year 2		Year 3	Year 4		Year 5

H. Exploration

What steps have you undertaken to research the Alberta/Canadian farming environment and opportunities? In your response, you may want to consider the following: Exploratory visits to Alberta, including the length and dates of your visit(s), discussions with government officials, realtors, producer organizations, industry representatives, Alberta farmers in the same production sector, financial institutions, etc. regarding the development of your investment proposal, and any observations or conclusions you came to as a result of your visit (attach a separate page).

I. Alberta Farm Investment Proposal					
Proposed type of ownership:	If sole proprietorship, please indicate the date you became or will become the registered owner of the operation:				
If partnership, identify partner and their percentage of ownership. Also identify citizens or permanent residents: (This is a requirement of the Alberta Foreign					
Partner:	Percentage of shareholding:				
Non-Canadian/permanent resident partner(s):	Percentage of shareholding:				
If limited company, identify directors and their percentage of shareholding. Als not Canadian citizens or permanent residents: (This is a requirement of the Fo	•				
Directors:	Percentage of shareholding:				
Non-Canadian/permanent resident director(s):	Percentage of shareholding:				
Have you ever been involved in a business failure, receivership or bankruptcy If yes, when? Date:	? □ Yes □ No				
J. Proposed Alberta Farm Enterprise					
Please describe the farm that you intend to operate (e.g. number of acres, live net income after expenses). Also describe any proposed venture/business are production company or agri-food processor. (e.g. pig production, potato processes viability of the proposed venture, the business plan will be reviewed Rural Development. (please attach your business plan to this application)	rangements you have established with a duction, pig packer supply contract, etc.)				
Have you made an offer to purchase a farm or land in Alberta? If so, please p	rovide details:				
Do you plan to expand and diversify your operation in Alberta over the next 3 the investment that you plan to make: (attach a separate page if required)	-5 years? Please describe your plans and				

K. Financial Information

Personal net worth statement

A complete and current statement of your total personal net worth is required. All assets and liabilities must be identified. However, do not include personal items such as jewelry, furniture, etc., as the ownership of such items is difficult to verify.

All assets listed must be your own personal holdings and must be documented. The sources of any funds or assets in your possession for less than one year must be identified.

You may be asked to present financial	documents to sup	port the informa	tion provid	ded in this	s statement.	
Assets						
Bank deposits (Foreign/Canadian)						
CURRENT AND SAVINGS ACCOUNTS	S (Specify currency	/)				
Date opened	Account number	er		Current balance		
(mm/dd/yy)						
(mm/dd/yy)						
(mm/dd/yy)						
(mm/dd/yy)						
(mm/dd/yy)						
		ТО	TAL CDN	\$		
FIXED DEPOSITS (Specify currency)						
Date of initial deposit	Maturity date			Current balance		
(mm/dd/yy)	(mm/dd/yy)					
(mm/dd/yy)	(mm/dd/yy)					
(mm/dd/yy)	(mm/dd/yy)					
(mm/dd/yy)	(mm/dd/yy)					
(mm/dd/yy)	(mm/dd/yy)					
TOTAL CDN						
Property						
Complete address	Year Purchased	Mortgaged	Purchase	price	Estimated current market value (specify currency)	
		☐ Yes ☐ No				
		☐ Yes ☐ No				
		☐ Yes ☐ No				
		☐ Yes ☐ No				
		TOTAL CDN	\$		\$	

Publicly traded stocks and other passive investments (Attach a separate sheet if required)					
Description	Quantity Estimated curre		Estimated curr	ent market value (specify currency)	
	TOTAL	CDN	\$		
Business assets					
Name	Percentage owned			Estimated current market value (specify currency)	
			TOTAL CDN	\$	
Other assets (Attach separate sheet if require	ed)				
Description				Amount (specify currency)	
			TOTAL CDN	\$	
L. Liabilities			TOTAL CDN	\$	
L. Liabilities Mortgages			TOTAL CDN	\$	
	Percentage owned	1	TOTAL CDN rent book value assets)	\$ Estimated current market value (specify currency)	
Mortgages		1	rent book value	Estimated current market value	
Mortgages		1	rent book value	Estimated current market value	
Mortgages		1	rent book value	Estimated current market value (specify currency)	
Mortgages		1	rent book value assets)	Estimated current market value (specify currency)	
Mortgages Name		1	rent book value assets)	Estimated current market value (specify currency)	
Mortgages Name Personal debts		1	rent book value assets)	Estimated current market value (specify currency)	
Mortgages Name Personal debts		1	rent book value assets)	Estimated current market value (specify currency)	
Mortgages Name Personal debts		1	rent book value assets)	Estimated current market value (specify currency)	
Mortgages Name Personal debts		1	rent book value assets)	Estimated current market value (specify currency)	
Mortgages Name Personal debts		1	rent book value assets)	Estimated current market value (specify currency)	

Other liabilities (e.g. deferred taxes, etc.)		
Nature of obligation		Amount (specify currency)
	TOTAL CDN	\$
M. Total Personal Net Worth		
Net worth statement		
Total assets		CDN\$
minus Total liabilities		CDN\$
	Net worth CDN	\$
N. Other Financial Information		
Funds in my possession on my arrival in Canada		CDN\$
Funds to transfer to Canada at a later date		CDN\$
Funds already in Canada		CDN\$
Funds or equity remaining abroad		CDN\$
Exchange rate used: CDN\$ 1=	TOTAL CDN	\$
O. Contact Information		
Canadian bank:		
Contact:	Telephone numb	per:
Foreign bank:		
Contact:	Telephone numb	per:
P. Program Evaluation		
AINP will be contacting you in the future for follow-up. Pleast preferably in Canada, who we may contact if we cannot rea your employer.		
Family name:	Given name(s):	
Phone number of contact person:	Email of contact person	on:
Q. Use of a Representative		
I have used a representative or third party in connection with	h this application to the	AINP: Yes No
If "Yes", the Candidate must complete the Candidate - Use of www.AlbertaCanada.com/AlNP008B	of a Representative (AINI	008B) form, which can be found at:

R. Declaration and Authorization

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 submittingan Application for Permanent Residence in Canada to Citizenship and Immigration Canada on the basis of an Alberta Immigrant Nominee Program (AINP) Nomination 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 Nomination and application do not guarantee that I will be granted permanent residence in Canada.
- 3. I understand that the AINP may decline this application or withdraw a Nomination:
 - a. If I have submitted any false statements or concealed a relevant or significant fact. Both constitute misrepresentation;
 - b. If I do not comply with any request for information required by the AINP to effectively administer and maintain the integrity of the program;
 - c. For reasons other than the above statements. As a result of this decline or withdrawal, the AINP may refuse to consider me as a Candidate for Nomination for an unspecified period.
- 4. I understand that I will be required to attend an interview, conducted by officials of the Government of Alberta, to assist in determining my eligibility as a Candidate under the AINP.
- 5. I understand all of the above statements, and have asked for and received an explanation, or language translation if required, on every point about which I may have been uncertain.

Authorization to collect and disclose personal information

By signing and submitting this form:

- 1. I acknowledge that the AINP will disclose, as necessary, information collected from this application under the program, to officials in the Government of Alberta, including but not limited to partner ministries, and to officials administering immigration, temporary foreign worker or other programs related to permanent residence or temporary residence within the Government of Canada.
- 2. I acknowledge that the Government of Canada will disclose, as necessary, personal information about me collected under the Immigration and Refugee Protection Act and its Regulations to officials administering the AINP. I also acknowledge that the AINP will collect such information.
- I authorize any individuals or businesses that I have referenced in this application and supporting material, to verify information I have provided or to provide additional details related to the information to the Government of Alberta, and authorize the Government of Alberta to collect such information.
- 4. 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.

Candidate Authorization Original signatures are required on the application in blue ink

Candidate's name (print)	Signature (Candidate)
Spouse's or common-law partner's name (print)	Signature (spouse/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)

Date signed (mm/dd/yy)