



ANNEX 1 - ADDITIONAL OCCUPATION GLOBAL TALENT STREAM

Employers should visit the [Temporary Foreign Worker \(TFW\) Program website](#), to verify that the Program is accepting applications for the specific occupation or sector for which they wish to hire the temporary foreign worker (TFW) and to determine if they are eligible to participate in the Program.

Privacy Notice Statement

The personal information that you provide is collected by Employment and Social Development Canada (ESDC) under the authority of the *Immigration and Refugee Protection Act* (IRPA) and the *Immigration and Refugee Protection Regulations* (IRPR), for the purpose of administering and enforcing the TFW Program.

The information that you provide may be shared with: Immigration, Refugees and Citizenship Canada and the Canada Border Services Agency for the administration and enforcement of the TFW Program and IRPA/IRPR; the Canada Revenue Agency for the administration and enforcement of the TFW Program; and, provincial/territorial governments for the administration and enforcement of provincial/territorial legislation and programs. The information may also be used by ESDC for research and evaluation purposes and to support the administration or enforcement of other programs in ESDC, including Service Canada and the Labour Program.

This information may also be shared with any Party identified by the employer on the LMIA application form or in the employment agreement.

Your personal information is administered in accordance with the IRPA, IRPR, the Privacy Act, the Department of Employment and Social Development Act (DESDA) and other applicable laws. You have the right to the protection of, access to, and correction of your personal information, which is described in Personal Information Banks: TFWP ESDC PPU 440 and TFWP Employer Compliance Reviews and Inspections ESDC PPU 715. Instructions for obtaining this information are outlined in the [Treasury Board of Canada Secretariat website](#).

This website may also be accessed on-line at any Service Canada Centre. You have the right to file a complaint with the Privacy Commissioner of Canada regarding the institution's handling of your personal information on the [Office of the Privacy Commissioner of Canada website](#).

A person, who contravenes a provision set out under sections 126 or 127 of the *Immigration and Refugee Protection Act* (misrepresentation), could be liable to a fine or to imprisonment, or to both. Also, providing inaccurate information, in the context of this application, may lead to an administrative penalty such as being ineligible to access the Program for a period of two years.

SECTION 1: EMPLOYER BUSINESS INFORMATION	
Canada Revenue Agency Payroll deductions program account number (15 digits):	
RP	
Business Legal Name	
SECTION 2: JOB OFFER DETAILS	
In this section, please provide details on the job offer and the position (with same duration, wage, job description, work location, etc.) for which the employer is requesting a TFW.	
Note: If employer is applying for additional occupations at this time, they must complete an Annex 1: Additional Occupation for each additional occupation to be assessed.	
Job Title:	Suggested National Occupational Classification (NOC):
How many TFWs is the employer requesting for this job offer and position (with same duration, wage, job description, work location, etc.)?	
Main duties of the job:	
Note: 2 years is the maximum duration of employment for Labour Market Impact Assessments issued under the Global Talent Stream	
Expected employment start date (YYYY-MM-DD):	Expected employment duration:
	<input type="checkbox"/> day(s) <input type="checkbox"/> week(s) <input type="checkbox"/> month(s) <input type="checkbox"/> year(s)
Employment duration rationale:	
Is the position part of a union?	
No Yes	

Indicate the language requirement stated in the offer of employment:

The offer of employment requires the ability to communicate orally in:

English French English and French

The offer of employment requires the ability to communicate in writing in:

English French English and French

The offer of employment does not require the ability to communicate in any specific language.

If this option is selected, clearly describe why the offer of employment does not require the ability to communicate in any specific language

The offer of employment requires the ability to communicate in a language other than English and French.

If this option is selected, identify the specific language needed and clearly describe why this is a bona fide employment requirement for performing the duties associated with the employment (if insufficient space, attach a separate signed and dated sheet):

Minimum education requirements of the job:

Doctorate/PhD

Doctor of Medicine

Master's degree

Bachelor's degree

College level diploma/certificate

Apprenticeship diploma/certificate

Trade diploma/certificate

Secondary school

Vocational school diploma/certificate

No formal education requirement

Additional Information:

Minimum experience/skills requirements of the job: (include years of experience and/or occupational designations such as CA, CMA, CGA, R.N., P. Eng)

Have you tried to recruit Canadians/permanent residents prior to submitting your application for this job?

Yes - Please describe your efforts to recruit Canadians/permanent residents:

No - Please explain why you have not attempted to recruit Canadians/permanent residents:

Were any employees working in the position being requested in this application laid off by the employer in the last 12 months?

No Yes If yes, how many Canadians/permanent residents? _____ How many TFWs? _____

Reason(s) for layoff(s) and positions affected:

Will the hiring of the TFW in the position being requested in this application lead to job losses or a reduction in work hours due to layoffs, now or in the foreseeable future, for Canadian/permanent resident employees in your workforce or in the Canadian workforce more generally? This includes job losses or reductions in work hours for Canadian/permanent resident employees resulting from outsourcing, off-shoring or other factors related to employing the TFW in the position being requested in this application. For the definition of outsourcing and off-shoring, see the applicant guide.

No Yes If yes, provide details:

SECTION 3: COMPENSATION AND BENEFITS

What is the wage range for all employees currently working in this same occupation, with the same skills and years of experience, at this work location?

Low-wage: \$ _____ /hour High-wage: \$ _____ /hour

OR There are no employees currently working in this occupation at this work location

Note: The wage range should be from the last two pay periods that have occurred within the six weeks prior to submitting the application.

Is the job offer for full-time employment (at least 30 hours of work per week) throughout the duration of employment covered by the LMIA?

Yes No If no, explain:

How many hours will the TFW work each day?

How many hours will the TFW work each (choose one)?
 Week: _____ Month: _____

What is the regular (non-overtime) wage in Canadian dollars per hour being offered to the TFW?

\$ per hour (mandatory) _____

What is the overtime wage in Canadian dollars per hour being offered to the TFW (if applicable)?

Overtime rate of \$ per hour: _____
 Starting after: _____ hours per day
OR
 _____ hours per day

Note: Employers must provide the calculation of an hourly wage in Canadian dollars, even if the position is salaried or paid in foreign currency.

Did you convert the wage from a monthly or yearly salary, or a currency other than Canadian dollars, or both?

No Yes If yes, provide calculations used to obtain hourly Canadian dollar wage:

Benefits:
 Disability Insurance Dental Insurance Pension Extended medical insurance (e.g. prescription drugs, paramedical services, medical services and equipment)

Other benefits (specify):

Vacation (if applicable):
 Days _____ (number of business days per year) Remuneration: _____ (% of gross salary)

SECTION 4: WORK LOCATION

Describe in your own words and in as much details as possible the principal business activity at this work location:

Business operating name of this work location:

PRIMARY WORK LOCATION

Provide the exact location of the TFW(s) primary work location:

City:	Province/Territory:	Postal Code:
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OTHER WORK LOCATION(S)

Provide the exact location of any other work locations for this job offer (attach a separate page if required):

City:	Province/Territory:	Postal Code:
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Is there a labour dispute in progress at any of the job offer work locations?

No Yes If yes, provide details regarding the labour dispute:

SECTION 5: SIGNATURE OF EMPLOYER

The individual signing this form must have authority for either the hiring or financial decisions of the organization (e.g. owner, franchisee, general manager, or senior executive - such as VP Human Resources).

I have read and I understand the Privacy Notice Statement found at the beginning of this application.

I declare that the information provided in this Labour Market Impact Assessment application is true, accurate and complete.

By signing this document I attest that I have read and understood the Privacy Notice Statement found at the beginning of this application; that the information provided in this Labour Market Impact Assessment application is true, accurate and complete; and I will comply with all [Temporary Foreign Worker Program](#) requirements as laid out, the *Immigration and Refugee Protection Act*, and the *Immigration and Refugee Protection Regulations*.

Signature of Employer

Printed Name of the Employer

Title of Employer

Date (YYYY-MM-DD)

A person, who contravenes a provision set out under sections 126 or 127 of the Immigration and Refugee Protection Act (misrepresentation), could be liable to a fine or to imprisonment, or to both. Also, providing inaccurate information, in the context of this application annex, may lead to an administrative penalty such as being ineligible to access the Program for a period of two years.

**Please complete the
Labour Market Impact Assessment -
Processing Fee Payment Form**

Printed on next page



For office use only

LABOUR MARKET IMPACT ASSESSMENT - PROCESSING FEE PAYMENT FORM TEMPORARY FOREIGN WORKER PROGRAM

Employers must pay a processing fee for each position requested, except applications that involve on-farm primary agriculture occupations such as farm managers/supervisors and specialized livestock workers and general farm workers, nursery and greenhouse workers and harvesting labourers (specifically NOC codes 0821, 0822, 8252, 8255, 8431, 8432 and 8611), and those solely to support a foreign national's immigration application.

The total processing fee must be paid before the employer's LMIA application can be processed.

Step 1 - Complete employer information section:

Employer Business Name:	
Canada Revenue Agency Business Number: <i>(First 9 digits are mandatory for Canadian employers)</i>	

Step 2 - Calculate total labour market impact assessment processing fee in Canadian dollars:

Number of positions requested _____ X \$1,000 = TOTAL, processing fee payment of \$ CAD _____

Step 3 - Select method of payment:

- Certified cheque or money order (postal or bank) made payable to the Receiver General for Canada
- Credit Card (Visa, MasterCard or American Express)

For payment by credit card, complete and sign this section

CREDIT CARD INFORMATION AND PAYMENT AUTHORIZATION

Name of cardholder (as it appears on the credit card):	Cardholder Telephone Number:
Credit card type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express	Last 4 digits of credit card:

AUTHORIZATION:
I authorize ESDC/Service Canada in the name of the Receiver General for Canada to charge _____ \$ CAD to my credit card
This is permission for a single transaction, and does not provide authorization for any additional charges.

Signature of cardholder:	Date : <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-right: 1px solid black; width: 25%; text-align: center;">YYYY</td> <td style="border-right: 1px solid black; width: 25%; text-align: center;">MM</td> <td style="width: 50%; text-align: center;">DD</td> </tr> </table>	YYYY	MM	DD
YYYY	MM	DD		

Send this Form to Service Canada only

Note:
Refunds will only be provided if a fee was collected in error (e.g. an incorrect fee amount was processed). There will not be refunds in the event of a negative labour market impact assessment since the fee covers the process to assess an application and not the outcome.



To be destroyed after processing

In order to protect your personal information, only provide the first 6 and last 4 digits of your credit card number. A Service Canada representative will call you at the number listed above for the remaining digits.

Credit card number: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: none; padding: 0 5px;">X</td> <td style="border: none; padding: 0 5px;">X</td> <td style="border: none; padding: 0 5px;">X</td> <td style="border: none; padding: 0 5px;">X</td> <td style="border: none; padding: 0 5px;">X</td> <td style="border: none; padding: 0 5px;">X</td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> <td style="border: 1px solid black; width: 20px; height: 20px;"> </td> </tr> </table>							X	X	X	X	X	X					Expiry date: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-right: 1px solid black; width: 25%; text-align: center;">MM</td> <td style="width: 75%; text-align: center;">YYYY</td> </tr> </table>	MM	YYYY
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MM	YYYY																		

TEMPORARY FOREIGN WORKER INFORMATION TEMPLATE

Complete and attach with your application the names of the Temporary Foreign Workers. If the names of the TFWs have not been identified yet, leave the Template blank. If you need more room than provided below, please attach additional sheets to identify additional workers.

Note:

After the positive LMIA letter and annexes have been issued, six months will be allocated to the:

- Employer to provide ESDC/Service Canada with the names of the TFWs; and
- TFWs to submit an application for a work permit to Immigration, Refugees and Citizenship Canada (IRCC).

WORKER #1

Last Name (as shown on the individual's passport):		First Name(s) (as shown on the individual's passport):	
Gender: Male Female	Date of birth (YYYY-MM-DD)	Citizenship(s):	
Location of primary residence outside Canada:		Location of residence if TFW is currently in Canada:	
City:		City:	
Country:		Country:	
If the TFW is currently in Canada, please indicate their immigration status:			
<input type="checkbox"/> Temporary Foreign Worker		<input type="checkbox"/> Visitor	
<input type="checkbox"/> Student		<input type="checkbox"/> Refugee Claimant	

WORKER #2

Last Name (as shown on the individual's passport):		First Name(s) (as shown on the individual's passport):	
Gender: Male Female	Date of birth (YYYY-MM-DD)	Citizenship(s):	
Location of primary residence outside Canada:		Location of residence if TFW is currently in Canada:	
City:		City:	
Country:		Country:	
If the TFW is currently in Canada, please indicate their immigration status:			
<input type="checkbox"/> Temporary Foreign Worker		<input type="checkbox"/> Visitor	
<input type="checkbox"/> Student		<input type="checkbox"/> Refugee Claimant	

WORKER #3

Last Name (as shown on the individual's passport):		First Name(s) (as shown on the individual's passport):	
Gender: Male Female	Date of birth (YYYY-MM-DD)	Citizenship(s):	
Location of primary residence outside Canada:		Location of residence if TFW is currently in Canada:	
City:		City:	
Country:		Country:	
If the TFW is currently in Canada, please indicate their immigration status:			
<input type="checkbox"/> Temporary Foreign Worker		<input type="checkbox"/> Visitor	
<input type="checkbox"/> Student		<input type="checkbox"/> Refugee Claimant	

WORKER #4		
Last Name (as shown on the individual's passport):		First Name(s) (as shown on the individual's passport):
Gender: Male Female	Date of birth (YYYY-MM-DD)	Citizenship(s):
Location of primary residence outside Canada:		Location of residence if TFW is currently in Canada:
City:		City:
Country:		Country:
If the TFW is currently in Canada, please indicate their immigration status:		
<input type="checkbox"/> Temporary Foreign Worker <input type="checkbox"/> Visitor <input type="checkbox"/> Student <input type="checkbox"/> Refugee Claimant		

WORKER #5		
Last Name (as shown on the individual's passport):		First Name(s) (as shown on the individual's passport):
Gender: Male Female	Date of birth (YYYY-MM-DD)	Citizenship(s):
Location of primary residence outside Canada:		Location of residence if TFW is currently in Canada:
City:		City:
Country:		Country:
If the TFW is currently in Canada, please indicate their immigration status:		
<input type="checkbox"/> Temporary Foreign Worker <input type="checkbox"/> Visitor <input type="checkbox"/> Student <input type="checkbox"/> Refugee Claimant		