



LABOUR MARKET IMPACT ASSESSMENT APPLICATION

HIGH-WAGE POSITIONS

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 Temporary Foreign Worker (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 TFW Program Employer Compliance Reviews and Inspections ESDC PPU 715. Instructions for obtaining this information are outlined on 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: BUSINESS INFORMATION

1. Canada Revenue Agency Business Number (The 15 digits are mandatory for Canadian Employers):		2. Business Legal Name (as registered with CRA):	
3. Business Address (as registered with CRA): Line 1:		4. City:	5. Province/Territory/State:
Line 2:		6. Country:	7. Postal/Zip Code:
8. Mailing Address (if different from business address): Line 1:		9. City:	10. Province/Territory/State:
Line 2:		11. Country:	12. Postal/Zip Code:
13. Website Address:		14. Date business started (YYYY-MM-DD):	
15. Organization type and structure (select all that apply):			
Business: <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Co-operative		Other: <input type="checkbox"/> Non-profit <input type="checkbox"/> Registered Charity	

SECTION 2: EMPLOYER CONTACT INFORMATION

PRINCIPAL EMPLOYER CONTACT INFORMATION (This person must be the employer or be an employee of the employer)

1. First Name:		Middle Name:		Last Name:		2. Job Title:	
3. Telephone Number:		Ext:		4. Other Telephone Number:		Ext:	
5. Fax Number:				6. Email Address:			
7. Email Preference: <input type="checkbox"/> Do not contact via email				8. Language of Correspondence: <input type="checkbox"/> English <input type="checkbox"/> French			
9. Mailing Address: Line 1:				10. City:		11. Province/Territory/State:	
Line 2:				12. Country:		13. Postal/Zip Code:	

ALTERNATE EMPLOYER CONTACT INFORMATION (This person must be the employer or be an employee of the employer)

14. First Name:		Middle Name:		Last Name:		15. Job Title:	
16. Telephone Number:		Ext:		17. Other Telephone Number:		Ext:	
18. Fax Number:		19. Email Address:		20. Email Preference:		21. Language of Correspondence:	
				<input type="checkbox"/> Do not contact via email		<input type="checkbox"/> English <input type="checkbox"/> French	
22. Mailing Address:				23. City:		24. Province/Territory/State:	
Line 2:				25. Country:		26. Postal/Zip Code:	

SECTION 3: THIRD-PARTY INFORMATION

1. Is the employer appointing a third-party to represent them for the assessment of this Labour Market Impact Assessment (LMIA) application? **Note:** The employer is responsible for all decisions made on their behalf by the third-party, for the purpose of this LMIA application.

Yes If yes, continue completing **Section 3: Third-party Information** No If no, skip to **Section 4: Labour Market Impacts**

2. Canada Revenue Agency Business Number (the 15 digits are mandatory for Canadian businesses):

3. Business Legal Name (as registered with CRA):		4. Business Operating Name (if different from Legal Name):	
5. Business Address:		6. City:	
		7. Province/Territory/State:	
Line 2:		8. Country:	
		9. Postal/Zip Code:	

THIRD-PARTY CONTACT INFORMATION (Authorized representative acting on behalf of the employer)

10. First Name:		Middle Name:		Last Name:		11. Job Title:	
12. Telephone Number:		Ext:		13. Other Telephone Number:		Ext:	
14. Fax Number:		15. Email Address:		16. Email Preference:		17. Language of Correspondence:	
				<input type="checkbox"/> Do not contact via email		<input type="checkbox"/> English <input type="checkbox"/> French	
18. Mailing Address Line 1:				19. City:		20. Province/Territory/State:	
Line 2:				21. Country:		22. Postal/Zip Code:	

23. Is the third-party being paid by the employer to represent them for the purpose of obtaining this Labour Market Impact Assessment (LMIA)?

Yes If yes, then which applies to the third-party?

a member of the Immigration Consultants of Canada Regulatory Council (ICCRC) Membership ID: _____

a member of the law society of the following province/territory: _____

a member of the *Chambre des notaires du Québec* Membership ID: _____

other (please describe): _____

No If no, then which applies to the third-party?

a family member or friend

a member of a non-governmental or a religious organization

a member in good standing of the ICCRC, a provincial or territorial law society, or the *Chambre des notaires du Québec* doing pro bono work

other (please describe): _____

SECTION 4: LABOUR MARKET IMPACTS

1. How many employees are employed nationally under the employer's 15 digit CRA business number?		2. Did the business report more than \$5 million (CAD) in annual gross revenue to CRA during its last tax year? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3. Will hiring a TFW result in direct job creation or job retention of Canadians/permanent residents? <input type="checkbox"/> No <input type="checkbox"/> Yes		4. If yes, provide details:	
5. Will hiring a TFW result in the development or transfer of skills and knowledge for the benefit of Canadians/permanent residents? <input type="checkbox"/> No <input type="checkbox"/> Yes		6. If yes, provide details:	
7. Will hiring a TFW fill a labour shortage? <input type="checkbox"/> No <input type="checkbox"/> Yes		8. If yes, provide details:	
9. Please describe any other benefits to the Canadian labour market that will result from offering this job to a TFW:			
10. In the last 12 months, did the employer lay off any employees working in the position(s) being requested in this application? <input type="checkbox"/> No <input type="checkbox"/> Yes		11. If yes, how many Canadians/permanent residents? _____ How many TFWs? _____ Provide reason(s) for the layoff(s):	
12. Will the hiring of the TFW(s) requested in this application lead to job losses, or a reduction in work hours, now or in the foreseeable future, for Canadian/permanent resident employees in the employer's workforce or to the Canadian workforce more generally as a result of lay-offs including those resulting from outsourcing, off-shoring or other factors related to utilizing a TFW? <input type="checkbox"/> No <input type="checkbox"/> Yes		13. If yes, provide details on the impact of hiring the TFW(s) on the employer's workforce and the Canadian workforce more generally:	
14. Does the business receive support through Employment and Social Development Canada/Service Canada's Work-Sharing program? <input type="checkbox"/> No <input type="checkbox"/> Yes		15. If yes, provide details:	
16. Is there a labour dispute in progress at the job location? <input type="checkbox"/> No <input type="checkbox"/> Yes		17. If yes, provide details:	

SECTION 5: JOB OFFER DETAILS

1. How many TFWs is the employer applying for in this occupation?

2. What is the job title of the position being offered to the TFW(s):

3. Describe, in your own words and in as much detail as possible, the main duties of the position offered to the TFW(s):

4. How is the position requested in this application necessary for the operations of the business and explain the impact on your operations should the position remain vacant?

5. What is the expected employment start date (YYYY-MM-DD)?

6. What is the expected employment duration?

_____ day(s) week(s) month(s) year(s)

7. Please justify the requested employment duration in accordance with the planned activities or projects within your organization.

8. Indicate the language requirement stated in the offer of employment:

 This position does not require the ability to communicate in any specific language. This position requires the ability to communicate orally in: English French English or French English and French The position requires the ability to communicate in writing in: English French English or French English and French The position requires the ability to communicate in a language other than English or French.

If this option is selected, indicate the other language required for the position and provide a rationale:

9. Minimum education requirements of the job:

- | | | |
|---|--|---|
| <input type="checkbox"/> No formal education requirement | <input type="checkbox"/> Professional degree | <input type="checkbox"/> Doctor of Medicine |
| <input type="checkbox"/> Completion of secondary school | <input type="checkbox"/> Bachelor's degree | <input type="checkbox"/> Other minimum education requirements |
| <input type="checkbox"/> Apprenticeship, trade or vocational diploma or certificate | <input type="checkbox"/> Master's degree | <input type="checkbox"/> Not specified by employer |
| <input type="checkbox"/> College level diploma/certificate | <input type="checkbox"/> Doctorate/Ph.D. | |

Describe the specific diploma/certificate, degree, Ph.D. or other education requirements that the job requires:

10. Minimum experience/skills requirements of the job (include years of experience and/or occupational designations such as CPA, RN, P.Eng.):

11. Is the occupation regulated at a federal/provincial/territorial level and requires occupational certification, licensing, or registration?

- No Yes

12. If yes, indicate the type of occupational certification, licensing, or registration and the name of the issuing body/ authority:

SECTION 6: WORK LOCATION

1. Business Operating Name of the primary work location:

2. Describe, in your own words and in as much detail as possible, the principal business activity at the primary work location:

3. Describe, in your own words and in as much detail as possible, any safety concerns or hazards associated with the principal business activity or site:

4. Address of the primary location where the TFW will work
Line 1:

5. City:

6. Province/Territory:

Line 2:

7. Postal/Zip Code:

Note: If necessary, attach a separate sheet. If the TFW will be working at multiple locations, include the business operating name, the description of the principal business activity, and the address of each additional work location.

SECTION 7: HOURS, PAY AND BENEFITS

1. 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?

Lowest Wage: _____ \$/hr Highest Wage: _____ \$/hr **OR** there are no employees currently working in this occupation, with the same skills and years of experience, at this work location

Note: The wage range should be from the last 2 pay periods that have occurred within the 6 weeks prior to submitting the application.

2. How many hours will the TFW work each day?

3. How many hours will the TFW work each week?

4. Will the TFW have an atypical schedule without standard daily or weekly hours?

No Yes

5. If yes, provide details:

6. Is the employer's job offer for a full-time position (average of at least 30 hours per week) throughout the duration of employment covered by this LMIA?

No Yes

7. If no, provide details:

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

Note: Employers must provide the calculation of an hourly wage in \$CAD, even if the position is salaried, paid in foreign currency, or paid by piecework.

9. What is the overtime wage in Canadian dollars per hour being offered to the TFW? (if applicable and must meet provincial/territorial requirements)

MANDATORY: If you have entered an overtime rate you must complete the section Starting after - hours per day or hours per week or both).

Overtime rate of \$ per hour

N/A

Starting after

_____ hours per day

_____ hours per week

10. Was the wage converted from a monthly or yearly salary, or a currency other than Canadian dollars, or both?

No Yes

11. If yes, provide calculations used to obtain hourly \$CAD wage:

12. Will the TFW be paid any contingent wages (e.g. piecework, mileage, commissions, guaranteed bonuses, or predictable overtime)?

No Yes

13. If yes, provide details:

14. Is the position part of a union?

No Yes

If yes, attach the section(s) of the collective bargaining agreement that list rates of pay.

15. Benefits (additional benefits offered over and beyond the provincial/territorial requirements):

Disability insurance Dental insurance Employer-provided Pension Extended medical insurance (e.g. prescription drugs, paramedical services, medical services and equipment)
 Other benefits (explain):

16. Vacation (must meet minimum provincial/territorial requirements):

Days _____ (# of business days per year) Remuneration _____ (% of gross salary) N/A

SECTION 8: RECRUITMENT

1. Is the position subject to a variation in minimum advertising requirements as listed on the [TFW program website](#), including the Quebec Facilitated Process?

Yes If yes, specify the variation requested and provide a rationale for meeting its criteria:

Refer to the website for guidance on the applicable recruitment or advertising [variation](#) and continue completing Section 8: Recruitment only if necessary. Variations are subject to review.

No If no, proceed to the next question

2. Did the employer try to recruit Canadians/permanent residents prior to submitting this LMIA application for this job?

Note: Most program streams require recruitment efforts within the 3 months prior to submitting an application. Please refer to the [website](#) for more details.

No If no, explain why the employer has not attempted to recruit Canadians/permanent residents:

Yes If yes, complete all the applicable boxes and provide the required information below

Method	Name of Advertising Source	Website Address (if applicable)	Advertisement #	Publication Date	Expiry Date

Proof of recruitment must be submitted with the LMIA application (i.e. copy of advertisements and information to support where, when and for how long the position was advertised).

3. How many applications/resumes were received from Canadians/permanent residents?	4. How many Canadians/permanent resident applicants were interviewed?
5. How many Canadians/permanent residents were offered the position?	6. How many Canadians/permanent residents were hired?
7. How many Canadians/permanent residents declined a job offer?	8. How many Canadians/permanent residents applied but were not interviewed or offered the position?

9. For each unsuitable Canadian/permanent resident applicant, provide a detailed explanation as to why the candidate did not meet the requirements of the position. If necessary, attach a separate sheet. However, **do not provide the names of the candidates** (e.g. applicant #1 – has not completed the apprenticeship program and therefore cannot work as a journey person).

SECTION 9: SEASONAL OCCUPATIONS

1. Is the application for a seasonal occupation?

- No
- Yes If yes, provide the following information:

2. Provide the specific months of the peak employment season every year:

From (month):

To (month):

3. What was the employer's total number of Canadian/permanent resident workers during the previous peak season?

4. What was the employer's total number of temporary foreign workers during the previous peak season?

SECTION 10: TRANSITION PLAN FOR HIGH-WAGE POSITIONS**PURPOSE:**

The Transition Plan is a mandatory requirement for all employers applying to hire temporary foreign workers (TFW) and who are offering a wage at or above the provincial/territorial median hourly wage. The plan will ensure that businesses that rely on TFWs have a firm plan in place to transition to a Canadian workforce over the period of time covered by the duration of employment indicated on the positive labour market impact assessment (LMIA) letter and annex. This plan will also be used if the employer re-applies for a subsequent LMIA for this occupation and at the same work location and will be verified if the employer is selected for an inspection.

1. Number of Canadians/permanent resident employees currently employed in the occupation at the work location:

2. Number of TFWs currently employed in the occupation at the work location:

3. Would the employer like to be considered for an exemption from having to provide a Transition Plan?

- No If no, continue completing the remainder of **Section 10: Transition Plan for High-wage Positions**
- Yes If yes, you must select at least one of the exemption criteria below and provide a rationale for why it applies to the position.

Refer to the [TFW program website](#) for more details on exemptions to the Transition Plan. Exemptions will be considered on a case by case basis.

- limited duration positions, defined as:
- the job is time-limited in nature and the employment duration may range from one day to a maximum of two years
 - there is no reasonable expectation that you could transition the position to a Canadian or permanent resident
 - the job will not be filled after the departure of the temporary foreign worker as the position will no longer exist
 - in some cases, repeat use of the specific position is the norm for the industry, but each employment duration is limited
- unique skill
- skills or traits which belong to a specific individual and are not readily available in Canada
- caregiver positions in health care institutions (specifically NOC 3012, 3233 and 3413 under two-digit NAICS 62)
- on-farm primary agricultural positions such as:
- farm managers/supervisors and specialized livestock workers (NOC 0821, 0822, 8252, and 8255); and
 - general farm workers, nursery and greenhouse workers and harvesting labourers (NOC 8431, 8432 and 8611)
- positions within a specialized occupation that qualifies for Quebec's facilitated Labour Market Impact Assessment process (applicable only to the first request for the same job at the same work location)

Provide a rationale for why the exemption criteria selected above applies to the position:

4. Has a Transition Plan been completed for this occupation and location before?

- No If no, the employer must submit a Transition Plan with their Labour Market Impact Assessment application
- Yes If yes, the employer must submit a new Transition Plan with their Labour Market Impact Assessment application; **AND**

Complete the following sub-section to report on the results of the commitments made in their previous Transition Plan; **AND**

Provide proof/documentation for the conducted or completed activities

Note: If the number of temporary foreign workers did not decrease relative to the number of Canadian/permanent resident workers for this occupation at this location as a result of the activities conducted in the previous Transition plan, the recruitment and training activities proposed on the subsequent, new Transition Plan form must be substantially different, or substantially expanded upon, from the activities on the previous Transition Plan(s).

5. Describe the results of your previous transition plan activities:

INSTRUCTIONS:

To begin, all employers must understand that the objective of the Transition Plan is to ensure that businesses have a firm plan in place to transition to a Canadian workforce over the period of time covered by the duration of employment indicated on the positive opinion letter and annex.

As a result the employer must conduct:

1. at least three distinct activities to recruit, retain and/or train Canadians/permanent residents in the occupation specified on the application; **AND**
2. **one additional distinct** activity to engage an organization serving underrepresented groups to identify potential candidates for recruitment or training (e.g. immigrant settlement offices, Indigenous, people with disabilities, youth or provincial/territorial unemployment centres);

OR

Employers could choose to do only the following:

one activity which facilitates the permanent residency of a TFW (e.g. making a permanent job offer or offering language training to the foreign worker to support the individual's permanent resident visa application). For Quebec employers, please provide a copy of the Quebec selection certificate; if not available provide the date it will be requested.

However, if they choose **ONLY** to support the permanent residency of a TFW, and do not proceed with it, they will be considered not to have met the requirements of their Transition Plan and as a result may be found non-compliant if they are later inspected. In addition, if an employer is applying for multiple positions for the same job at the same work location but not all of the TFWs are interested in pursuing permanent residency, the employer **MUST** conduct other training and/or recruitment activities that would reduce the business's reliance on foreign workers. Employers are encouraged at all times to submit Transition Plans that include a variety of activities.

Note:

If the employer cannot commit to one of these activities, you must provide a detailed rationale. If insufficient space, attach a separate signed and dated sheet.

SELECT RECRUITMENT AND TRAINING ACTIVITIES:

At this step, you can review the following list of potential activities that could be undertaken as part of the employer's Transition Plan. In addition, you are encouraged to submit other innovative strategies and activities not included in the list below. The goal of these activities is to allow the employer to transition to a Canadian workforce in a reasonable period of time.

- Increase wages offered
- Employee referral incentive program
- Offer part-time or flexible hours as an option
- Offer health insurance or other benefit
- Financial support for relocations of Canadians or permanent residents
- Hire headhunting firm to identify prospective candidates
- Partner with unions / industry associations to identify potential candidates
- Job fairs
- Apprenticeship / internship / Co-op
- Government programs
- Paid-leave for education
- On-the-job training
- Ongoing advertisement / modified advertising plan (e.g. use different sources, target different audiences)
- Other

Once you have chosen the activities, you will need to complete a separate table for each activity, including the 1 activity which targets members of an underrepresented group.

For each table, you will need to identify the specific activity, describe what will be involved, indicate the planned date (e.g. every year the local college has a job fair for students graduating in the trades and it normally takes place in January) and provide a general benchmark in terms of the number of applications that the employer is hoping to receive from that specific event or activity.

TRANSITION PLAN ACTIVITY TABLES:

Activity #1:

Description of Proposed Activity <i>(e.g. scale of the investment to be made - in training, scholarships / bursaries, partnerships, location of activities - training, job fairs, projected increase in wages)</i>	Expected Outcome <i>(e.g. provide the results the employer expects from the proposed activity, including a timeframe or timeline for the activity)</i>

Employer Comments:

Activity #2:

Description of Proposed Activity <i>(e.g. scale of the investment to be made - in training, scholarships / bursaries, partnerships, location of activities - training, job fairs, projected increase in wages)</i>	Expected Outcome <i>(e.g. provide the results the employer expects from the proposed activity, including a timeframe or timeline for the activity)</i>

Employer Comments:

TRANSITION PLAN ACTIVITY TABLES:

Activity #3:

Description of Proposed Activity	Expected Outcome
<i>(e.g. scale of the investment to be made - in training, scholarships / bursaries, partnerships, location of activities - training, job fairs, projected increase in wages)</i>	<i>(e.g. provide the results the employer expects from the proposed activity, including a timeframe or timeline for the activity)</i>

Employer Comments:

Activity #4:

Description of Proposed Activity	Expected Outcome
<i>(e.g. scale of the investment to be made - in training, scholarships / bursaries, partnerships, location of activities - training, job fairs, projected increase in wages)</i>	<i>(e.g. provide the results the employer expects from the proposed activity, including a timeframe or timeline for the activity)</i>

Employer Comments:

TRANSITION PLAN ACTIVITY TABLE FOR SUPPORT OF PERMANENT RESIDENCY:

Activity #5:

Description of Proposed Activity	Expected Outcome
<p><i>This activity should facilitate the permanent residency of a temporary foreign worker.</i></p> <p><i>For Quebec employers, please provide a copy of the Quebec selection certificate; if not available provide the date it will be requested.</i></p> <p><i>(e.g. making a permanent job offer or offering language training to the foreign worker to support the individual's permanent resident visa application).</i></p>	<p><i>(e.g. provide the results the employer expects from the proposed activity, including a timeframe or timeline for the activity)</i></p>

Employer Comments:

IMPORTANT INFORMATION

The Transition Plan is a requirement of applying for an LMIA and is agreed upon between the employer and Service Canada. As a result, if the employer wishes to make any changes to the plan after the LMIA is issued, you must contact Service Canada to request such a change. If Service Canada accepts the request, the employer will be required to submit and sign a revised Transition Plan that incorporates the agreed-upon changes.

The submission of a revised Transition Plan will be critical particularly if you are selected for an inspection at some point in the future. In accordance with the provisions of the IRPR, ESDC may conduct an inspection to verify the employer's compliance with the conditions set out in the positive letter and annexes (which includes the Transition Plan). As a result, the inspection could include a review of the employer's Transition Plan and if Service Canada does not have a copy of the revised plan, the employer will be held accountable for the Transition Plan that is on file.

As part of the inspection, or if the employer is applying for a subsequent LMIA for the same occupation at the same work location, they must be able to provide proof that they conducted the activities identified in the plan. Acceptable documentation could include:

- Proof of advertising (e.g. Job Bank records, newspaper ads)
- Support letters from partnering organizations
- Invoices (e.g. for job fair booths, financial supports provided to TFWs)
- Job advertisements demonstrating an increase in the wages offered
- Documentation of participation in government-sponsored employment projects
- Documentation demonstrating new hires, including Bridge-to-work positions such as apprenticeships/internships (e.g. letters of offer, payroll information)
- Documentation to prove the employers' effort to support the foreign worker's application for permanent residency (IRCC or relevant immigration program)

SECTION 11 : EMPLOYER RESPONSIBILITIES

Temporary Foreign Workers have the same rights as Canadians and permanent residents and are covered under the same labour legislation and regulations. The Government of Canada takes the health and safety of foreign workers very seriously and will not tolerate any form of abuse of foreign workers or of the Temporary Foreign Worker Program.

When hiring a Temporary Foreign Worker for the High-wage Stream of the Temporary Foreign Worker Program, Employers should be aware of their responsibilities which include:

- Adhering and complying with federal-provincial/territorial legislation and regulations pertaining to recruitment, employment standards and occupational health and safety.
- Making reasonable efforts to provide a workplace that is free from physical, sexual, psychological and financial abuse and must not confiscate the temporary foreign worker's identification.
- Ensuring that the temporary foreign worker(s) are performing the same occupation and duties as you had offered them and were reported by you during the application process
- Ensuring that the working conditions in the offer of employment meet generally accepted Canadian standards and remain so for the duration of the employment.
- You must provide temporary foreign workers with the same wages and benefits as those provided to Canadian and permanent resident employees working in the same occupation that are consistent with the prevailing wage for the occupation and region where the worker is employed. Wages paid during employment must remain substantially the same as the wages offered and not less favourable.
- Employers must always ensure that the TFWs they want to hire under the TFW Program are covered from the provincial/territorial workplace safety insurance provider, **where required by law**. In provinces/territories where the provincial/territorial legislation allows employers the flexibility to opt for a private insurance plan, employers must ensure that:
 - o any private plan chosen provides the same or better coverage than that offered by a province/territory; and,
 - o all employees on the worksite are covered by the same provider with the same benefits
- Undertaking the activities as you committed to in the Employer Transition Plan, if applicable.
- Providing the worker with a copy an employment contract which has been signed by the employer and the worker which clearly outlines the terms and conditions of employment.
- Not recovering costs of hiring the temporary foreign worker(s) such as the LMIA fee, recruitment, etc. This also applies to any third parties used.
- Reporting any errors or changes to an approved LMIA or the temporary foreign worker to ESDC/Service Canada.
- Retaining all documentation that relates to compliance with program acts, regulations and requirements for a period of six years beginning on the first day of employment of the foreign national.
- Giving all reasonable assistance to an officer conducting an inspection such as but not limited to attending interviews and on-site inspections, answering questions, and providing information and documentation that relates to all Program conditions and requirements. Inspections with or without prior notice can be conducted anytime within a six-year period beginning on the first day of employment of the foreign worker.

Employers who are found non-compliant with these conditions may be subject to consequences including: warnings; issuance of negative Labour Market Impact Assessments; administrative monetary penalties; bans from the program; suspension and/or cancellation of approved labour market assessments; and/or the publishing of the business name on a public website along with details of the violation.

For more details on the program requirements of the Temporary Foreign Worker Program, please visit the [Hiring a Temporary Foreign Worker website](#) .

SECTION 12: DOCUMENTATION CHECKLIST - HIGH-WAGE POSITION

IMPORTANT: Employers must use this step-by-step checklist to ensure that all the documents required are submitted, otherwise there will be delays in processing the application.

Under this stream, employer must complete, sign (where applicable) and submit the following documents:

- This Labour Market Impact Assessment application form**
 - Additional attached sheets if there was insufficient room to answer a question on the form
- Documentation supporting the business legitimacy.** [The list of required documents](#) is available on the TFW Program website. ESDC/Service Canada may request that employers submit additional proof of business legitimacy documents at a later date.
- Copy of the Section(s) of Collective Bargaining Agreement related to Rates of Pay (if applicable)**
- Proof of Recruitment (Job advertisements and/or other recruitment activities)**

Submitted documents must include where, when and for how long the position was advertised and/or the recruitment activity took place. These documents must also prove that the advertisements and/or recruitment activities targeted the appropriate audience for the occupation.

Employers must conduct at least three different recruitment activities, they must advertise on the Government of Canada's [Job Bank](#). Employers who choose to use an alternative method, must submit a written rationale and explanation. Employers must also conduct at least two additional methods of recruitment which are consistent with the occupation (targets an audience that has the appropriate education, professional experience or skill level required for the occupation). One of the methods used must be national in scope, and easily accessed by residents of any province or territory, as people in high-wage positions are often mobile and willing to re-locate for work.

Depending on the nature of the position and/or the province of work, a recruitment variation may apply. Proof of recruitment **may or may not** be required in these cases. Refer to the [TFW program website](#) for more details.

- Proof of Job Bank Advertisement**
 - If Job Bank was not used, **attach a written rationale and explanation**
- Proof of Recruitment - additional method**
- Proof of Recruitment - additional method**

Employers must send all required documentation to the [Service Canada Processing Centre](#) responsible for processing their specific type of Labour Market Impact Assessment application.

A complete application means that employers have:

- used the latest version of the application form
- filled out all of the required fields in all of the necessary forms (except for the TFW information in the case of an Unnamed LMIA)
- included all of the required documentation
- signed the forms where required
- submitted the fee payment with the application

If this application is incomplete, Service Canada staff will inform the employer that it will not be processed. Incomplete applications and supporting documents submitted will not be retained or returned to the employer. As a result, employers are advised to submit copies, not original documents.

SECTION 13: DECLARATION OF THE THIRD-PARTY REPRESENTATIVE (IF APPLICABLE)

I, hereby, declare that the information in SECTION 3: THIRD-PARTY INFORMATION is true, accurate and complete.

Signature of the Third-party Representative

Printed name of the Third-party Representative

Date (YYYY-MM-DD)

SECTION 14: APPOINTMENT OF THIRD-PARTY (IF APPLICABLE)

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).

FOR THE PURPOSE OF THIS LABOUR MARKET IMPACT ASSESSMENT APPLICATION:

I, hereby, appoint the third-party named in SECTION 3: THIRD-PARTY INFORMATION as my representative to act on my behalf in order to obtain a Labour Market Impact Assessment from ESDC/Service Canada in order to hire a foreign national for the position described above.

I, hereby, agree to ratify and confirm all that my third-party representative shall do or cause to be done by virtue of this appointment.

This appointment shall remain in full force and effect only for the processing of this application, unless due notice in writing of its revocation has been given to ESDC/Service Canada.

Signature of Employer

Printed Name of Employer

Date (YYYY-MM-DD)

Signature of Employer #2 (if applicable)

Printed Name of Employer #2

Date (YYYY-MM-DD)

SECTION 15: 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). For In-home Caregiver positions, employers must be the parent or legal guardian of the child receiving care, be the recipient of care or have a valid power of attorney for the individual receiving care.

By signing this document employers attest that they 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 that they understand, accept, and will comply with all Temporary Foreign Worker Program requirements, as specified in the [Immigration and Refugee Protection Act](#), [Immigration and Refugee Protection Regulations](#) and all of the [Temporary Foreign Worker Program requirements](#).

Signature of Employer

Printed Name of the Employer

Title of Employer

Date (YYYY-MM-DD)

Signature of Employer #2 (if applicable)

Printed Name of the Employer #2

Title of Employer #2

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, may lead to an administrative penalty such as being ineligible to access the Program for a period of two years.

Important: Employers must immediately inform Service Canada of any changes related to the foreign worker's terms and conditions of employment as described in the positive LMIA letter and any annexes. In accordance with the provisions of the Immigration and Refugee Protection Regulations, ESDC may conduct an inspection to verify the employer's compliance with the conditions set out in the positive LMIA letter and annexes. As a result, this inspection could include a review of the employer's file and if Service Canada does not have a copy of the changes, the employer will be held accountable for the information that is on file.

TEMPORARY FOREIGN WORKER INFORMATION TEMPLATE

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

Note:

The positive Labour Market Impact Assessment (LMIA) letter and annex specifies the expiry date of the LMIA. The TFW must submit an application for a Work Permit prior to the expiry of the LMIA. Requests to modify, add, remove or change a name on an LMIA must be received by ESDC/Service Canada at least:

- 15 days prior to the expiry of the LMIA; or
- 20 days prior to the expiry of the LMIA if more than 10 names.

WORKER #1

First name:	Last Name:
Date of Birth (YYYY-MM-DD):	Country of residence:

WORKER #2

First name:	Last Name:
Date of Birth (YYYY-MM-DD):	Country of residence:

WORKER #3

First name:	Last Name:
Date of Birth (YYYY-MM-DD):	Country of residence:

WORKER #4

First name:	Last Name:
Date of Birth (YYYY-MM-DD):	Country of residence:

WORKER #5

First name:	Last Name:
Date of Birth (YYYY-MM-DD):	Country of residence:

WORKER #6

First name:	Last Name:
Date of Birth (YYYY-MM-DD):	Country of residence:

WORKER #7

First name:	Last Name:
Date of Birth (YYYY-MM-DD):	Country of residence:

**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.

Note: No costs associated with seeking an LMIA, including this processing fee, may be directly or indirectly recovered from the TFW.

Step 1 – Complete employer information section:

Employer Business Name:	
Canada Revenue Agency Business Number: <i>(The 15 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, 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):	Employer primary contact name:			
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; text-align: center; width: 25%;">YYYY</td> <td style="border-right: 1px solid black; text-align: center; width: 25%;">MM</td> <td style="text-align: center; width: 25%;">DD</td> </tr> </table>	YYYY	MM	DD
YYYY	MM	DD		

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.



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To be destroyed after processing

Credit card number:	Expiry date: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border-right: 1px solid black; text-align: center; width: 50%;">MM</td> <td style="text-align: center; width: 50%;">YYYY</td> </tr> </table>	MM	YYYY
MM	YYYY		