Request a Business Trip to New Brunswick





The principal applicant must complete this form. Please print clearly.

Do not provide			NT PERSONAL IN	NFORMATION e, consultant or lawy	er in this section				
Name (Last, First	, Middle)			[☐ Male ☐ Female				
Date of birth (dd,mm,yyyy) Country of citizenship Passport No.									
Current resident	ial address, inclu	uding postal code	e (Please do not us	se a third party addres	s)				
()_ Telephone (daytii	me)	() Telephone (e	vening)	Email					
Include all depen	dent family meml		T FAMILY MEMB	ERS					
Family name	Given name(s)	Relationship	Birth date (dd,mm,yyyy)	City, country of residence	Will be included in your application?				
					□Yes □No				
					□Yes □No				
					□Yes □No				
					□Yes □No				
					□Yes □No				
					□Yes □No				
					□Yes □No				

Use the followi	ng chart to describe yo	our speaking ability.			
Level		Ability		English	French
Advanced	Operational comman inaccuracies	d of the language with only	occasional		
Intermediate	Effective command o misunderstandings	f the language despite som	ne inaccuracies and		
Basic	Partial competence in	n familiar situations.			
Provide details		ARY AND POST SECONE			
	•	· ·		0 15	
In	stitution	Location	Dates	Certificate	e issuea
	PREVIOUS	IMMIGRATION APPLICA	TION(S) TO CANADA		
Have you or you	our family members pro	eviously made application,	to Canada, for any of t	he following?	
Work permit Study permit Refugee status	☐Yes ☐ No ☐Yes ☐ No ☐Yes ☐ No	Immigration	resident visa to Canada ominee Program	☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐	No No No
		ame, category of application clined, state the reason and			

PREVIOUS VISITS TO CANADA

	re you staying in Canada, or have you previously stayed in Canada? Yes No If yes, indicate the eason (tourism, employment, studies, business, refugee claimant)										
Reason	Loc	ation		Dates	Re	eason	Loc	ation		Dates	
											_
					_						-
											_
											-
											-
RELATIVES LIVI	NG IN N	FW RRIIN	SWI	CK AND O	THER	PROVIN	CES OR 1	rerri	TORIE	ES OF CANADA	Δ
Do you, or your spo students, workers, to complete the followi	emporary										
Name		Relations	hip	Statu	s		Residential address (include postal code)		Time in Canada		
							-				
EDUCATION	IN NEW	BRUNSW	ICK	AND OTHE	ER PR	OVINCE	S OR TER	RITO	RIES (OF CANADA	
Have you, or spouse complete the followi		n-law part	ner d	or depender	nt child	ren studi	ed in Can	ada?	∐Yes	s	
Family memb	ber	Ins	titut	ion and lo	cation		Dates		Cei	rtificate issued	
											_
		I				<u> </u>					

EMPLOYMENT IN NEW BRUNSWICK AND OTHER PROVINCES OR TERRITORIES OF CANADA

Have you, your spouse/cocomplete the following:	ommon-law partner	or dependent childre	n worked in Canada?	Yes □No If yes,
Family member	Occupation	Business Name	Address	Start/End Date
	IMMIGF	RATION REPRESEN	TATIVE	
I have appointed a paid or permanent residence to C			alf with respect to my applete the following:	olication for
My paid representative i	s a member in go	od standing of the:		
☐ Immigration Consultan	its of Canada Regu	latory Council	Membership Number	
c ☐ Canadian provincial or	•	•		
☐ Chambre des notaires	du Québec (Notary	')		
Company name			Represer	ntative
Current business address	s, including postal o	code		
(
Telephone	Email		Website	
My unpaid representativ	/e is			
Current address , includin	g postal code			
()				
Telephone	Email		Relations	hip to Applicant

DEMONSTRATED MANAGEMENT ABILITY

Provide significant details of management skills obtained in the last five years.

Skills	Company name	Describe your management experience	Provide relevant examples
Finance			
Sales and Marketing			
Human Resources			
Operations			

BUSINESS OWNERSHIP IN THE LAST FIVE YEARS

Years	Business name	Type of business	Percentage Ownership	Co-owners and Percentage Of Ownership

RESEARCH PLAN FOR NEW BRUNSWICK
Provide details of the research you will conduct. You must be specific.
Before the exploratory visit
During the exploratory visit
After the exploratory visit
BUSINESS PLAN IN NEW BRUNSWICK
Provide details of your planned business activities in New Brunswick. If you have already invested in a business, provide details of the business.

DECLARATION OF APPLICANT

I declare that the information I have given in this application is truthful, complete an	d correct.
I understand all of the above information, having asked for and obtained an explana was not clear to me.	ation on every point which
Principal Applicant – Sign and Print Your Full Name	Date (dd/mm/yyyy)

Request a Business Trip - Document Checklist

Use the following checklist to assist you in gathering the documents necessary to request a business trip. Check \square each item on the checklist. Assemble your completed forms and supporting documents in the order they appear on the following checklist. Do not use binders, page protectors or report covers to organize your application.

If a document we require is not available to you, attach a written explanation when you submit your application along with other documents or information that might verify the issue in question.

Any document that is not in English or in French must be accompanied by the English or French translation along with an affidavit from a qualified translator; and a certified copy of the original document.

Documentation submitted with your application will not be returned. You should obtain multiple originals of any documentation submitted with your application (such as reference letters, police certificates) so you are prepared if you need to submit a new application. You must keep a copy of the completed forms and supporting documents.

If you do not provide legible photocopies, do not fully complete and sign the forms and provide all supporting documents, your application will be returned without processing.

1.	Requesting A Business Trip (NBPNP–006) To be completed by the principal applicant, signed and dated	
2.	NBPNP Processing Fee Payment – Business Plan Applicants (NBPNP-011BP) Attach the processing fees and submit with your request for a business trip to New Brunswick.	
3.	Consent Form for Business Applicants (NBPNP-002) Completed, dated and signed by the principal applicant and spouse or common-law partner.	
4.	Travel Documents / Passports (Principal Applicant and Spouse or Common-law Partner) Copies of pages containing the biographical data and the expiry date Copies of passport pages showing Canadian visa and immigration stamps Copies of visas from countries you have lived, other than your country of nationality	
5.	Accumulation of Assets Statement (NBPNP-008) Employment income: date, amount and source for each year of employment Business income: amount accumulated while you managed a business Investment income: shares, units, bonds, interest, dividends, capital gains Cumulative gains on personal assets including real estate Inheritance, donations and non-bank loans	
6.	 Personal Net Worth Statement (NBPNP-007) To be completed by the principal applicant, signed and dated Official bank statements, transaction records from banks, fixed / time / term deposits certificates for the last six months Proof of property ownership and its valuation, purchase and sale agreements, mortgage loan agreement, etc. Transactions of stocks and securities accounts including the history of transactions and dates of opening the accounts. Outstanding liabilities including personal or business loans, mortgages or other monetary obligations Proof of repayments (partial or full) of mortgage or personal or business loans. Other valuable assets. 	

7.	Management Experience Financial statements for three years including: Accounting firm reports on letterhead Balance sheet and profits and loss statement Proof of business ownership including: Business registration certified by relevant government authority Tax registration certificate for the company Corporate income tax returns Certificates or payment receipts from the relevant government authority confirming current tax status Payroll List Proof of your registered capital Letter from relevant authorities confirming the amount of original investment Articles of Incorporation or Articles of Association or Shares Certificate List of shareholders and shareholdings Capital verification reports, if applicable Staff records showing the number of full time employees you supervised	
8.	 Work Experience Employment contracts from present and past employers for each employment position held in the 10 years prior to the date of application until present and which is listed on the application form Up-to-date letters of reference from your past and current employers including the specific period of employment with the company including the positions held during the period of employment and the time spent in each position; full details of main responsibilities in each position; total annual salary plus benefits; signature of the immediate supervisor or the personnel officer of the company; a business card of the person signing and of the principal applicant, if available. Letters must be written on company letterhead and show the company's full address, telephone, fax numbers, website (if applicable) and be stamped with the company's official seal. Proof of personal income taxes and social insurance paid for each employment position held in the 10 years prior to the date of application until present and which is listed on the application form, issued by the bureau responsible for collecting these fees 	
9.	Education / Training / Qualifications Copies of degrees, diplomas, certificates Copies of transcripts for each post-secondary degree or diploma obtained	