

ASSESSMENT FOR TEMPORARY WORKERS

FOR ANYONE SEEKING A TEMPORARY WORK AUTHORIZATION FOR CANADA. IF YOU HAVE AND TECHNICAL PROBLEMS WITH THIS FORM, YOU MAY

CONTACT US DIRECTLY AT: info@servicelinks.ca

DATE:

1) CONTACT PERSON	
LAST NAME	FIRST NAME:
EMAIL	PHONE:
	I AM A FOREIGN INDIVIDUAL SEEKING TEMPORARY ENTRY INTO CANADA. I AM A REPRESENTATIVE OF A FOREIGN BUSINESS OR EMPLOYER. I AM A REPRESENTATIVE OF A CANADIAN BUSINESS OR EMPLOYER.
2) WORK PERMIT APPLICANT	
INFORMATION IS ONLY REQUIRED IF DIFFERENT THAN IN SECTION 1	LAST NAME: FIRST NAME:
	EMAIL: MOBILE:
AGE	GENDER:
COUNTRY OF CITIZENSHIP	CITY AND COUNTRY WHERE YOU ARE CURRENTLY RESIDING:
3) RESUME	UPLOAD OR COMPLETE SECTION 4) AND 5)
4) EDUCATION	
EDUCATION LEVEL	DOCTORATE & MASTER DEGREE BACHELOR DEGREE INVOLVING EQUIVALENT OF A LEAST 3 YEARS FULL TIME STUDIES 3-YEARS EQUIVALENT FULL TIME STUDIES / TRAINING LEADING TO A DIPLOMA, TRADE CERT. OR APPRENTICESHIP 2-YEARS EQUIVALENT FULL TIME STUDIES / TRAINING LEADING TO A DIPLOMA 1- YEARS EQUIVALENT FULL TIME STUDIES / TRAINING LEADING TO A DIPLOMA HIGH SCHOOL
MAJOR	

CANADA: Unit B 209-2099 Lougheed Hwy, Shaughnessy Square, Port Coquitlam, British Columbia V3B 1A8 t +1 604.944.7912 f +1 604.944.7913

COMPLETED	
YEAR OF COMPLETION	
5) WORK EXPERIENCE YOU MAY SKIP THIS SECTION IF YOU UPLOADED YOUR RESUME IN SECTION 3) LIST YOUR WORK EXPERINCE ALONG WITH DETAILS OF POSITION, RESPONSABILITIES ETC	
6) OFFICIAL LANGUAGES	PLEASE INDICATE YOUR ABILITIES IN BOTH THE ENGLISH AND FRENCH LANGUAGES, AS FOLLOWS:
FLUENT:	VERY GOOD COMMAND OF THE LANGUAGE IN A RANGE OF SOCIAL AND WORK SITUATIONS, AND NO DIFFICULTY COMMUNICATING IN PROFESSIONAL CAPACITY
WELL:	CAN COMMUNICATE REASONABLY WELL ABOUT PERSONAL AND FAMILIAR THINGS
WITH DIFFICULTY	COMMAND OF JUST A FEW BASIC WORDS
ENGLISH	READING:
	WRITING:
	SPEAKING:
7) CANADIAN EMPLOYER	IDENTITY OF CANADIAN BUSINESS OR EMPLOYER, OR INTENDED BUSINESS ACTIVITY.
NAME OF CANADIAN BUSINESS OR EMPLOYER MAKING THE OFFER TO THE PERSON IDENTIFIED IN SECTION 2 ABOVE	
CITY, PROVINCE	
POSITION OFFERED TO FOREIGN WORKER	
DUTIES OF POSITION BEING OFFERED	
PLEASE PROVIDE A SYNOPSIS OF THE EXPECTED DUTIES FOR THIS POSITION; IF NO OFFER EXISTS FROM A CANADIAN BUSINESS OR EMPLOYER, PLEASE DETAIL THE NATURE OF YOUR INTENDED BUSINESS VISIT	



SERVICE LINKS CANADA INC WILL THE FOREIGN INDIVIDUAL BE YES TRANSFERRED FROM A FOREIGN ENTERPRISE TO A CANADIAN BRANCH, AFFILIATE, PARENT OR NO SUBSIDIÁRY? 8) AFFILIATED COMPANY IDENTITY OF AFFILIATED FOREIGN BUSINESS OR EMPLOYER. (ONLY FOR INTRA COMPANY TRANSFERS) NAME OF AFFILIATED COMPANY OUTSIDE OF CANADA CITY, COUNTRY CURRENT POSITION DUTIES AT THIS POSITION DURATION OF EMPLOYMENT 9) ADDITIONAL INFORMATION

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