



SCHEDULE 6

ECONOMIC CLASSES - BUSINESS IMMIGRANTS

THE PRINCIPAL APPLICANT MUST COMPLETE THIS FORM.

By submitting this form, you consent to the release by the Canadian Government, as necessary, of any personal financial information or corporate financial information of which you are the proprietor to the appropriate government authorities.

It is important that you complete this form fully and accurately, so that we can better assess your financial background and standing, your personal history and experience.

The information you provide will be used to gauge your ability to meet the requirements of the *Immigration and Refugee Protection Act* and *Regulations* as it applies to applicants in the Entrepreneur, Investor or Self-Employed persons classes.

Before you start completing this form, make enough photocopies for your needs. You can also print all or part of this form from our Web site at www.cic.gc.ca

If there is not enough space to provide all the necessary information, attach a separate sheet of paper with further details. Print your name at the top of each additional sheet and indicate the form's title and the number of the question you are answering.

1. Indicate which class you are applying under (choose one only)

Investor Entrepreneur Self-employed Persons

2. Your full name

Family name

Given name(s)

3. Your date of birth

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Language

Which is your first official language: English French

Which is your second official language: English French

Your proficiency in English

	High	Moderate	Basic	None
Speak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Read	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Write	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your proficiency in French

	High	Moderate	Basic	None
Speak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Read	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Write	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Language (continued)

Have you taken an approved test to assess your proficiency in English or French?

Yes ► Provide a copy of approved test results.

No ► Provide evidence of your proficiency in Canada's official languages.

If you are applying under the **investor class**, complete all of pages **2, 4** and **5**. Do **not** complete pages **3** and **6**.

If you are applying under the **entrepreneur class**, complete all of page **2 (except question 9)** and pages **4, 5** and **6**. Do **not** complete page **3**.

If you are applying under the **self-employed persons class**, complete all of pages **3, 4** and **5**. Do **not** complete pages **2** and **6**.

If you are applying under the **investor class**, complete all of questions **6 - 7** and questions **8 or 9** on this page and proceed to page 4.
 If you are applying under the **entrepreneur class**, complete all of questions **6 - 8** on this page and proceed to page 4.
 If you are applying under the **self-employed persons class**, do **not** complete this page.

6. Have you made a business exploration trip to Canada in the five years preceding the date of your application?

No Yes ► Give details

7. Have you participated in business immigration initiatives administered jointly by the federal and provincial governments of Canada?

No Yes ► Give details

8. Business ownership / Performance summary
 (PLEASE COMPLETE ONE FORM PER BUSINESS)

A Name of business (Complete in full)	
B Type of business:	C Type of ownership: <input type="checkbox"/> Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation
D Identify partner and percentage (%) of ownership (including spouse or common-law partner)	
Name of partner(s) with more than 10% ownership	Percentage (%) of ownership

E Business ownership in the 5 years preceding the date of application	ANNUAL SALES	NET INCOME (AFTER TAX)	NET ASSETS	NUMBER OF FULL-TIME JOB EQUIVALENTS										
Most recent operating year <table style="width: 100%; border: none;"> <tr> <td style="border: none;">M</td><td style="border: none;">Y</td><td style="border: none;">to</td><td style="border: none;">M</td><td style="border: none;">Y</td> </tr> <tr> <td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td> </tr> </table>	M	Y	to	M	Y	_	_	_	_	_				
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Previous year 1 <table style="width: 100%; border: none;"> <tr> <td style="border: none;">M</td><td style="border: none;">Y</td><td style="border: none;">to</td><td style="border: none;">M</td><td style="border: none;">Y</td> </tr> <tr> <td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td> </tr> </table>	M	Y	to	M	Y	_	_	_	_	_				
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Previous year 2 <table style="width: 100%; border: none;"> <tr> <td style="border: none;">M</td><td style="border: none;">Y</td><td style="border: none;">to</td><td style="border: none;">M</td><td style="border: none;">Y</td> </tr> <tr> <td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td> </tr> </table>	M	Y	to	M	Y	_	_	_	_	_				
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Previous year 3 <table style="width: 100%; border: none;"> <tr> <td style="border: none;">M</td><td style="border: none;">Y</td><td style="border: none;">to</td><td style="border: none;">M</td><td style="border: none;">Y</td> </tr> <tr> <td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td> </tr> </table>	M	Y	to	M	Y	_	_	_	_	_				
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Previous year 4 <table style="width: 100%; border: none;"> <tr> <td style="border: none;">M</td><td style="border: none;">Y</td><td style="border: none;">to</td><td style="border: none;">M</td><td style="border: none;">Y</td> </tr> <tr> <td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td><td style="border: none;"> _ </td> </tr> </table>	M	Y	to	M	Y	_	_	_	_	_				
M	Y	to	M	Y										
_	_	_	_	_										

9. For investor class applicants only:

Experience in business management
 In order to meet the business experience option, "management of at least 5 full-time job equivalents per year in the business," you must have managed the full-time job equivalents for at least 2 years in the past 5 years. Provide details including the name(s) of the business(es), your job title, your management responsibilities, your salary, and the number of full-time employees that you managed. Use a separate page if necessary.

Complete this page if you are applying under the **self-employed persons class**.
Do **not** complete this page if you are applying under the investor or entrepreneur classes.

10. Your experience

If you are applying in the self-employed class, indicate the number of years of full-time relevant experience you have in the period of five years preceding the date of your application. If necessary, attach another sheet of paper.

Describe your self-employed experience in cultural activities or athletics, or describe your participation at the world-class level in cultural activities or athletics, or describe your farm management experience (in the five years preceding your application).

11. Study in Canada

Have you or, if applicable, your accompanying spouse or common-law partner, completed a program of full-time study of at least two years at a post-secondary institution in Canada?

No Yes ▶ You or Your spouse or common-law partner

Provide evidence that you have completed at least a 2-year program in Canada.

12. Work in Canada

Have you or, if applicable, your accompanying spouse or common-law partner, worked full-time in Canada?

No Yes ▶ You or Your spouse or common-law partner

Provide evidence that you have worked full-time in Canada.

13. Do you or, if applicable, your accompanying spouse or common-law partner, have a relative living in Canada who is a citizen or a permanent resident of Canada?

No Yes ▶ You or Your spouse or common-law partner

- Relationship
- | | |
|--|---|
| <input type="checkbox"/> Mother or father | <input type="checkbox"/> Grandmother or grandfather |
| <input type="checkbox"/> Daughter or son | <input type="checkbox"/> Granddaughter or grandson |
| <input type="checkbox"/> Sister or brother | <input type="checkbox"/> Aunt or uncle |
| <input type="checkbox"/> Niece or nephew | <input type="checkbox"/> Spouse or common-law partner |

14. Intended occupation

Describe the occupation in which you intend to be self-employed. Provide details of location and anticipated investment (if applicable).

15. Personal net worth statement

A complete and current statement of total personal net worth of you and your spouse or common-law partner is required. All assets and liabilities must be identified. All assets must be your own personal holdings or your spouse's or common-law partner's, and must be documented. You must present financial statements and other documentation to support the information provided in this statement and to demonstrate that your personal net worth was legally obtained (documents presented are subject to verification).

ASSETS

A BANK DEPOSITS

Current and Savings Accounts				Fixed (term) deposits									
Date opened			Account number	Current balance		Date of initial deposit			Maturity date		Current balance		
Day	Month	Year		Foreign (specify currency)	Canadian\$	Day	Month	Year	Day	Month	Year	Foreign (specify currency)	Canadian\$
TOTAL						TOTAL							

B REAL PROPERTY (Use a separate page if necessary)

Description	Year purchased	Mortgaged (✓)		Purchase price	Estimated current market value	
		Yes	No		Foreign (specify currency)	Canadian\$
TOTAL						

C PUBLICLY TRADED STOCKS AND OTHER INVESTMENTS (Use a separate page if necessary)

Description	Quantity	Estimated current market value	
		Foreign (specify currency)	Canadian\$
TOTAL			

D IMMIGRANT INVESTOR PROGRAM INVESTMENT (INVESTOR APPLICANTS ONLY)

Description	Date paid			Amount currently invested
	Day	Month	Year	
TOTAL CDN\$				

ASSETS (continued)**E BUSINESS** (Use a separate page if necessary)

Name	% owned	Current book value (net assets)	Estimated current market value	
			Foreign (specify currency)	Canadian\$
TOTAL				

F PENSIONS AND OTHER ASSETS (Use a separate page if necessary)

Description	Amount	
	Foreign (specify currency)	Canadian\$
TOTAL		

LIABILITIES**G REAL PROPERTY MORTGAGES** (Use a separate page if necessary)

Complete Address	Current balance	
	Foreign (specify currency)	Canadian\$
TOTAL		

H OTHER PERSONAL DEBTS (Use a separate page if necessary)

Nature of debt	Amount	
	Foreign (specify currency)	Canadian\$
TOTAL		

I NET WORTH

Total assets (A + B + C + D + E + F)	CDN\$	<input type="text"/>
Less total liabilities (G + H)	- CDN\$	<input type="text"/>
= NET WORTH	= CDN\$	<input type="text"/>

J

Total funds available for settlement in Canada	CDN\$	<input type="text"/>
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For applicants in the Entrepreneur Class only:**16. Entrepreneur's Declaration**

I intend and have the ability to meet the conditions of the Entrepreneur Class, namely that after I become a permanent resident of Canada, I must:

- control a percentage of equity of a qualifying Canadian business equal to or greater than 33 1/3%;
- provide active and ongoing management of the qualifying Canadian business;
- create at least one incremental full-time job equivalent for Canadian citizens or permanent residents, other than for myself or my family members;
- meet these conditions for a period of at least one year within a period of three years after I become a permanent resident;
- provide to an officer evidence of compliance with the conditions within the period of three years after the day I become a permanent resident; and
- provide to an officer, not later than six months after the day I become a permanent resident; my residential address and telephone number; and during the period beginning 18 months after and ending 24 months after the day I become a permanent resident, evidence of my efforts to comply with these conditions.

I also acknowledge and understand that all of my family members are subject to the condition that I meet the above conditions.

I have read and understand the above declaration and I will meet the conditions as they are listed.

Yes No

(If you do not check "Yes", your application will be returned to you.)