

# Employer Request for an R204(c) Letter of Support

## Atlantic Immigration Pilot Program (AIPP)



A candidate who has a valid endorsement certificate from the Province of New Brunswick may, at the request of the New Brunswick employer, be eligible for a [work permit](#) without requiring a Labour Market Impact Assessment (LMIA). The employer must demonstrate true urgency for requiring that the Applicant be granted this letter of support to apply for a temporary work permit. The employer must also demonstrate the Applicant's readiness to submit a full and complete permanent residence application within 90 days of applying for their work permit.

Employers must submit an offer of employment and pay a compliance fee of \$230 through the [IRCC Employer Portal](#) before the applicant can submit an application for their work permit.

We no longer issue separate Letters of Support for spouses or common-law partners

[Spouses or common-law partners](#) of work permit holders who have been nominated for permanent residence by a province are entitled to open work permits for the duration of the work permit of the provincial nominee principal applicant or until the expiry of the spouse or common-law partner's passport or travel document, whichever is earlier irrespective of the skill level of the principal applicant's occupation. **The LMIA exemption code to use for spouses and common-law partners is T13.**

Employers should include this form along with supporting documents and email it to: [aipp-ppia@gnb.ca](mailto:aipp-ppia@gnb.ca)

**Subject:** AIPP Request for an R204(c) Letter of Support

**Body:** LAST NAME, First Name; Date of birth (mm-dd-yyyy)

| EMPLOYER INFORMATION |               |                          |
|----------------------|---------------|--------------------------|
| Company Name:        |               | AIPP Designation Number: |
| Contact Name:        | Email address | Telephone number:        |

| INB CANDIDATE INFORMATION  |  |
|--|--|
| <p><b>Important:</b> All approved certificates will be issued via the candidate's <a href="#">INB</a> account.</p> <p>If the original application was submitted and approved prior to the activation of the INB portal, an account will be created for you, and you will be provided instructions via email that will explain how access your INB account.</p> <p>If you no longer have access to your INB account, we will contact you prior to restoring access.</p> | <p>INB CANDIDATE ID #</p> <p><input type="checkbox"/> I do not have an INB Candidate ID</p> <p><input type="checkbox"/> I do not have access to my INB account</p> |

| PRINCIPAL APPLICANT INFORMATION                                     |                         |  |                                  |
|---|-------------------------|--|----------------------------------|
| Family name(s) exactly as shown on your passport or travel document |                         | Given name(s) exactly as shown on your passport or travel document |                                  |
| Date of Birth (mm-dd-yyyy)  | NBNP certificate number |  | IRCC file number (if applicable) |
| Work permit number (if applicable)                                  |                         | Work permit expiry date (if applicable)                            |                                  |

| CONTACT INFORMATION   |               |            |                         |                  |             |
|---|---------------|------------|-------------------------|------------------|-------------|
| E-mail address  |               |            |                         | Telephone number |             |
| Current mailing address, including postal code  |               |            |                         |                  |             |
| PO Box  | Apt./Unit     | Street no. | Street name             | City or Town     |             |
| Province or State   |               | District   | Country                 |                  | Postal Code |
| <b>Important:</b> you must also update your contact information, including current mailing address, in your INB account |               |            |                         |                  |             |
| IMMIGRATION REPRESENTATIVE INFORMATION IF APPLICABLE  |               |            |                         |                  |             |
| Representative name   |               |            | Company or Organization |                  |             |
| RCIC number (if applicable)   | email address |            |                         | Telephone number |             |

**EXPLAIN THE URGENT NEED FOR THIS WORK PERMIT**

Immigration, Refugees and Citizenship Canada has committed to expedite processing of all applications for permanent residence processed under the Atlantic Immigration Pilot. Consequently, it is expected that 80% of applicants will be provided with a decision on their application for permanent residence within six (6) months, precluding the need for a temporary work permit.

Please check the current work permit processing time for the applicant's current country of residence at: <https://www.canada.ca/en/immigration-refugees-citizenship/services/application/check-processing-times.html>.

Country of Residence: \_\_\_\_\_ Number of weeks to issue a work permit: \_\_\_\_\_

**COPIES OF THE FOLLOWING DOCUMENTS MUST ACCOMPANY THIS FORM**

**Principal Applicant**

- <https://www.canada.ca/content/dam/ircc/migration/ircc/english/pdf/kits/forms/imm5654e.pdf>
- passport pages showing the passport number, date of issue and expiry, photo, name, date and place of birth
- Educational Credential Assessment (ECA)
- valid language test results
- current or expired work permit(s) (if applicable)
- written request from IRCC (if applicable)
- current AIPP Endorsement Certificate

**EMPLOYER DECLARATION**

I, \_\_\_\_\_, do solemnly declare that the information I have given in the forgoing application is truthful, complete and correct, and I make this solemn declaration believing it to be true and knowing that it is of the same force and effect as if made under oath. I understand that any false statements or concealment of a material fact may result in my exclusion from the NBNP. I understand all the above information, having had the opportunity to ask for or having asked for and obtained an explanation on every point which was not clear to me. I will immediately inform the AIPP if any of the information or the answers provided in this application form changes.

\_\_\_\_\_  
Signature of Employer

\_\_\_\_\_  
Date (mm-dd-yyyy)

Personal information on this form is collected under paragraph 37(1)(b) of the Right to Information and Protection of Privacy Act, SNB 2009, c. R-10.6 (RTIPPA). If you have any questions about the collection and handling of personal information you may contact the Department of Post-Secondary Education, Training and Labour (PETL) at 500 Beaverbrook Court, Suite 500, Fredericton, New Brunswick, CANADA E3B 5X4. Telephone: (506) 453-3981; Facsimile: (506) 444-6729; Email: [immigration@qnb.ca](mailto:immigration@qnb.ca); Website: [www.weclomenb.ca](http://www.weclomenb.ca)