

NSNP 500: International Graduate Entrepreneur

Current Business Information

Is your business:

Start-up Business Succession

Business Information:

Legal name of company/organization: _____

Operating name: _____

Registry of Joint Stock Companies number _____

Business registration number for tax/payroll purposes: _____

Start-up investment amount (if applicable): _____

Business purchase price (if applicable): _____

Business website: _____

Current Business Address:

_____ *street address* *city, town*

_____ *province* *postal code*

Current Business Mailing Address

Same as current address?

Yes No

If no provide the following information:

_____ *street address* *city, town*

_____ *province* *postal code*

What is your current position or title in your current business (example: owner, partner, manager, etc.)?

How many hours per week do you spend managing the business? _____

How many years have you owned the business? _____

What type of business do you own (example: manufacturing, exporting, processing)?

How many employees does the company have? _____

How many employees do you manage? _____

What are the total company assets?

What is your level of decision-making ability in the business?

Industry/sector:

- Aerospace
- Agri-food/seafood
- Biotechnology
- Culture
- Energy
- Forestry
- Information and communications technologies
- Manufacturing
- Mining/materials
- Oceans technology
- Retail/services
- Tourism
- Other (please specify): _____

Identify the type of ownership:

- Sole proprietorship
- Partnership
- Corporation

Provide the ownership breakdown:

Name of Owner	Percentage of Ownership (%)

Describe any capital asset purchases (e.g.: machinery and equipment).

Provide a detailed description of the products/services your company offers its customers.

Describe your inventory by type (e.g.: finalized products, raw materials)

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Provide a list of your business' major suppliers:

Name of Supplier	Supplier Contact Person	Phone Number

Provide a list of your business' major customers (e.g.: wholesale or corporate, repeat customers)

Name of Customer	Customer Phone Number

Provide a description of any leasehold improvements or renovations to date:

Improvement/Renovation	Investment Amount (\$)

Human Resource Information:

Please provide the following information for each of your employees (attach additional tables/pages(s) if necessary):

	Family Name	Job title	Date began (dd/mm/yyyy)	Hourly wage
	Given Name	NOC 2021	Date end	
1				
2				
3				
4				
5				
6				

Out-of-Province Travel:

Please provide details of all out-of-province travel conducted since submitting your Expression of Interest to the NSNP: International Graduate Entrepreneur Stream.

Destination City	Destination Province/Country	Date Arrived Destination (dd/mm/yyyy)	Date Departed Destination (dd/mm/yyyy)	Purpose

Business Declaration

The business I have established or purchased in Nova Scotia, as per my application, complies with all applicable laws and regulations, including, but not limited to the following statutes, as amended from time to time (refer to official versions):

[Labour Standards Code](#)

novascotia.ca/lae/employmentrights/docs/labourstandardscodeguide.pdf

[Worker's Compensation Act](#)

wcb.ns.ca/About-Us/Legislation-Workers-Compensation-Act

[Nova Scotia Human Rights Act](#)

nslegislature.ca/sites/default/files/legc/statutes/human%20rights.pdf

[Nova Scotia Occupational Health and Safety Act](#)

nslegislature.ca/sites/default/files/legc/statutes/occupational%20health%20and%20safety.pdf

[Nova Scotia Health Protection Act, Food Safety Regulations](#) (Food Services Industry Only)

novascotia.ca/just/regulations/regs/hpafood.html

I acknowledge that I have read, understand, and agree to this declaration, and that my representative, if applicable, has provided me with a completed application form for review.

surname

given names

date of birth (dd/mm/yyyy)

Signature of principal applicant

Date (dd/mm/yyyy)

Confidentiality Notice

Any confidential information collected during the course of accessing our programs or using our services is used only for providing you with services; for example, for registration to our programs or for determining your eligibility to services, including but not limited to the Nova Scotia Nominee Program, and program integrity efforts. Confidential information may include, but is not limited to, business plans, financial information related to the business, business registration, business licenses, ownership structure, corporate records or other information related to the business.

We do not disclose your confidential information except as required to fulfill the purpose(s) of a program or service and only to the extent required or authorized by law. In connection with providing you with programs, services or in the event of suspected fraud or non-compliance with provincial or federal legislation, confidential information may be collected from, used by or disclosed to any federal, provincial, municipal or local authority or any other person, department, financial institution, designated service provider, agency or organization.

Sign the notice and have your spouse or common-law partner and all dependent family members 19 years old or older who are coming with you to Canada sign as well. Failure to sign will result in your application being deemed incomplete and it will not be processed.

I acknowledge that I have read and understand the above information regarding the collection, use, and disclosure of my confidential information.

Signature of principal applicant

Date (dd/mm/yyyy)