

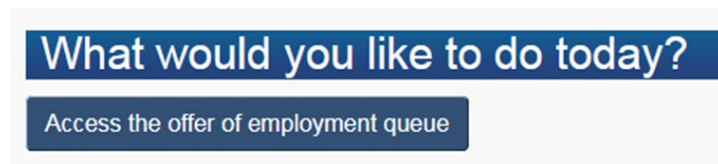
## CIC Employer Portal – How to complete an Offer of Employment

Before you start the online process ensure you have a copy of the identification page of the individual's passport and a copy of the offer letter at hand. These are important as you will need to provide information regarding the individual (Legal Name, Date of Birth, Country of Residence, Citizenship) and the job (Job Title, Salary, Duties, Duration) to IRCC.

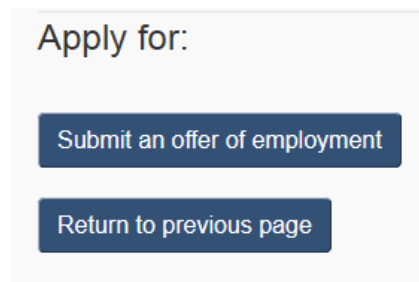
Note that department administrators may only submit offers for Visiting Faculty, Post-doctoral Fellows and Clinical Fellows. All other exemptions must be routed through Faculty Relations.

To start:



1. Log in to the [Employer Portal](#).
2. On the main page, select "Access the offer of employment queue".



3. On the "Employment queue" page select "Submit an offer of Employment". If there are many offers of employment in your queue you will need to scroll to the bottom of the page.



The Form is divided into 4 sections





 

## LMIA-exempt Offer of employment

**Offer of employment to a foreign national exempt from a Labour Market Impact Assessment (LMIA)**

Complete your online application by choosing a section below.

You should review your application before you send it to make sure that it is complete and accurate.

Form Name	Status	Options
Business Information	 In progress	<input type="button" value="Start form"/>
Foreign Worker	 Not started	<input type="button" value="Start form"/>
Job Details	 In progress	<input type="button" value="Start form"/>
Wage and benefits	 Not started	<input type="button" value="Start form"/>

4. Select "start form" on the Business Information option.

## Business Information

5. Provide Business information as requested. UBC's business number, legal and operating names will be pre-populated.

### LMIA-exempt Offer of employment

#### Business information

**Business**

Please provide the most up to date information about the business or company

**Business number** ?

  
**Business legal name** ?  
**Business operating name** ?  
**\* Business telephone number (required)**  

Business address

Type of business

Business details

User contact information

Enter the main department phone number

After completing information select "Next" (You will need to do this in after each section).

## Business Address

6. Enter the address information for your unit.

**Business address**

Apartment/unit number (if applicable)

\* Street number (required)

\* Street address/name (required)

Street address/name line 2 (if applicable)

\* Country/territory (required)  
Canada

\* Province/state (required)  
British Columbia

\* City/town (required)  
Vancouver

\* Postal code (required)  
V6T 1Z3

\* Is your business address different than mailing address? (required)  
No

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The information will default to either the address information for the Branch User or for the first unit in that branch to create an Offer of Employment. Each unit will need to enter their own information.

## Type of Business

7. This information should auto-populate.

**Type of business**

\* Type of business (select applicable option) (required) ?  
Other

\* Specify (required)  
Educational Institution

\* Is the business a franchise? (required) ?  
No

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Type of Business – Educational Institution. After the first Offer of Employment has been completed within the branch, this and other information will auto-populate.

UBC is not a franchise. Select No

## Business Details

8. The business details information should auto-populate so you won't need to enter anything.

The image shows a screenshot of a web form titled "Business details". The form contains several fields, each with an orange arrow pointing to a callout box on the right. The callout boxes contain the following information:

- Website:** www.ubc.ca (points to the "Web address" field)
- Business Start Date:** 1908-01-01 (points to the "Date business started" field)
- Primary Business Activities:** Teaching, research & training of undergraduate and graduate students (points to the "Describe the principal business activity" field)
- # of Employees:** over 100 (points to the "Number of employees" field)
- Gross Income:** Over 5 million (points to the "Gross income" field)

The form fields are:

- Web address:** www.ubc.ca
- Date business started:** 1908, January, 01
- Describe the principal business activity:** Teaching, research & training of undergraduate and graduate students
- Number of employees:** Over 100 Employees
- Gross income:** Over 5 million

At the bottom of the form, there are "Previous" and "Next" buttons.

## Business Primary Contact

9. The person completing the form provides their contact details.

Note that the name provided on this screen will be the signatory's name on the declaration screen. The person completing the information is the only one who can 'sign' the declaration section so their details must be added here.

Business details

User contact information

Primary contact is the person who will be contacted by IRCC for further information.

\* First name(s) *(required)*

Middle name (if applicable)

\* Last name(s) *(required)*

\* Job title *(required)*

\* Contact phone number *(required)*

Extension

Contact fax number

\* Contact email address *(required)*

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The information on this page will default to that of the first user in the branch. If you are the first user then this information will be blank.

If information already appears add or adjust the information as appropriate.

Select "Save and exit".

## Foreign Worker Information

10. Enter Foreign Worker data as requested

### LMIA-exempt Offer of employment

#### Foreign Worker Information

Foreign Worker Information

Family name

Given name(s)

Gender

Please select

Date of birth

Select Year Select Month Select Day

Country of birth

Please select

Country of residence

Please select

Citizenship

Please select

Passport number ?

Ensure what you enter matches the information in the foreign national's passport

Select "Save and exit".

## Job Offer Details

### 11. Enter job offer details

**Job Offer Details**

**Details of Job**

**Business legal name**  
University of British Col

**Business operating name**  
University of British Col

**Business number**  
108161779

**LMIA exemption title ?**  
Please select

**LMIA exemption code ?**

**Explanation of how the job meets the requirements of the exemption being requested ?**

**Job title**

**NOC code ?**  
Please select

#### LMIA Exemption Title:

Visiting Faculty – C22 Reciprocal employment- Academic Exchanges - R205(b)

Postdoctoral Fellows – C44 Post-doctoral fellows - R205(c)(ii)

Clinical Fellows – C45 Foreign Medical (or Dental) Residents and Medical Research Fellows- R205(c)(ii)

The LMIA Exemption code will auto-populate:

Visitors– C22

Postdocs – C44

Clinical Fellows - C45

#### Job Requirements:

Visiting Faculty – This is a research and teaching opportunity for a faculty member from another academic institution.

Postdoctoral Fellows – This is a research position for a recent PhD recipient. The primary focus is research, however, the individual may be provided with an opportunity to teach. (if applicable add, The individual is in receipt of a postdoctoral fellowship award from....)

Clinical Fellows – This is an opportunity for a physician specialist to receive advanced training in the field of (enter field) to advance clinical care and/or medical research. The transfer of skills and knowledge is a significant benefit to Canadian universities and the medical field.

#### National Occupation Classification (NOC) Code:

Visiting Faculty – 4011

Postdoctoral Fellow – 4011

Clinical Fellow - 3111

#### Job Title:

- For Visiting faculty title must be "Visiting xxxxxx" with the title corresponding to that at their home institution. Do **not** enter Visiting Scientist (*contact FR/HR*)
- Postdoctoral Fellow
- Clinical Fellow



12. Complete all job offer details information

**Please provide the address of the primary physical job location.**

\* Country/territory *(required)*  
Canada

Apartment/unit number (if applicable)

\* Street number *(required)*

\* Street address/name *(required)*

Street address/name line 2 (if applicable)

\* Province/state *(required)*  
British Columbia

\* City/town *(required)*  
Vancouver

\* Postal code *(required)*

\* Will the worker perform job duties at more than one job location? *(required)*  
Yes

If the individual will perform work in more than one location select Yes and complete the secondary address information.

\* Expected start date of employment (required)

\* Expected duration of employment (required) ?

\* Main duties of the job (required) ?

\* Minimum education requirements of job (required)

Other training required ?

\* Experience and skills required to complete the job duties (required)

\* Are there provincial/federal certification, licensing or registration requirements for the job? (required) ?

\* There are Employer compliance fees associated to an LMIA-Exempt offer of employment. Will you be paying your fees or are you fee exempt? (required)

Next →

**Start Date & Duration:**

This information must match the details of the offer letter.

Remember that for Visiting Faculty the maximum duration is 2 years.

**Experience & Skills:**

Visiting Faculty member: indicate that the individual holds a position at the University of Z to which they will be returning.

Postdoctoral Fellow: indicate that the individual has recently received their PhD.

Clinical Fellow: indicate that Physician must be specialized in.....

Enter additional information as required.

**Compliance Fees:**

Indicate yes you will be paying the fees

Clinical Fellows: Must be licensed by the College of Surgeons & Physicians of BC

Select "Next" to continue.

## Employer Primary Contact Information

13. Provide the contact information.

▸ Details of Job

▾ Employer Primary contact Information

Primary contact is the person who will be contacted by CIC for further information.

**First name(s)**

**Middle name (if applicable)**

**Last name(s)**

**Job title**

**Contact phone number**

**Extension**

**Contact fax number**

**Contact email address**

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This will normally be the same person as listed as the Business Primary Contact, but as required could be a different person.

After entering the information, select "Save & Exit"

## Wage and Benefits Details

14. Provide current wage and benefit information applicable to the position

**Wage and benefits**

\* Are you paying the foreign national directly? *(required)*  
Yes

\* Type of wage *(required)*  
Wage in Canadian dollars per hour

\* Wage amount *(required)*  
[Empty text box]

\* Number of work hours per day *(required)*  
8

\* Number of work hours per week *(required)*  
40

\* Total of number of work hours per month *(required)*  
173

\* The overtime rate in Canadian dollars *(required)*  
0

\* Overtime starts after how many hours per week *(required)*  
0

Additional information  
[Empty text box]

Alternate compensation scheme (if applicable) ?  
[Empty text box]

For unpaid visitors and Postdocs receiving NUF pay, you have to make a choice, even though neither of the 2 choices apply.

Choose whichever seems the most appropriate to you.

Ensure the amount matches what is on the offer letter.

If not being paid by UBC enter "0".

For full-time Fellows & Visitors:

- 8 hours per day
- 40 hour work
- 173 hours per month

Overtime is not applicable to faculty appointments

If the individual is self-funded or in receipt of a fellowship award enter this information here. For visiting faculty indicate there is no remuneration from UBC if this is applicable.

Select "Next" to continue.

## Benefit Information

15. Enter information or leave blank as applicable

The screenshot shows a web form titled "Benefits" with a blue header. Below the header, there is a section titled "\* Benefits (required) ?" with four checkboxes: "Disability Insurance", "Dental Insurance", "Pension", and "Extended medical insurance (e.g. Prescription drugs, paramedical services, medical services and equipment)". An orange arrow points from the "Dental Insurance" checkbox to a callout box. Below this is a "Type of vacation" dropdown menu with "Please select" as the current selection. Another orange arrow points from this dropdown to a second callout box. Below the dropdown is a text input field labeled "Other benefits (if applicable). Please specify:". At the bottom of the form is a "Previous" button with a left-pointing arrow.

**Benefits**

Visitors: no Benefits  
Postdoc Fellows: Dental & Medical Benefits if meeting UBC Benefits eligibility criteria.  
Clinical Fellows: Dental & Medical Benefits if meeting UBC Benefits eligibility criteria.

**Vacation**

If paid appointment vacation must meet minimum of 2 weeks

Select "Save and exit". .

If you have entered all required information the status for each section will be noted as 'Complete'. Should you wish you can review or update the information by clicking on "update form" button beside each section.

## LMIA-exempt Offer of employment

### Offer of employment to a foreign national exempt from a Labour Market Impact Assessment (LMIA)

Complete each section below to submit your online offer of employment.

You should review your offer of employment before you submit to make sure it is complete and accurate.

Form Name	Status	Options
Business information	✓ Complete	<a href="#">Update form</a>
Foreign Worker	✓ Complete	<a href="#">Update form</a>
Job Details	✓ Complete	<a href="#">Update form</a>
Wage and benefits	✓ Complete	<a href="#">Update form</a>

[← Exit](#)

[Continue →](#)

Once all information is correct, select "continue" to sign-off and move to the payment screens.

## Document checklist

Once you select "continue" the following screen will appear. Normally there will be no forms to upload, so you should select the 'Next' button to continue.

Start Again | Share with CIC | Modify my Answers | Print | Help

### Your document checklist

**Administrator Name:** Supporting Documents

Details	Document Name	Instructions	Options
---------	---------------	--------------	---------

**Administrator Name:** Optional Documents

Details	Document Name	Instructions	Options
---------	---------------	--------------	---------

There are no required documents for this Online Application.

### Fees

Fees			
Application	Quantity	Price (CAD) per unit	Total (CAD)
LMA-Exempt work permit Fee	1	\$230	\$230

The fee shown is an estimate based on the fees in effect on the day that this Personal Reference Code is issued. The actual fees to be paid will be calculated on the date of submission.

Total Price (CAD) \$230

Exit Questionnaire | Next

## Declaration & Electronic Signature

The Administrator Name that appears at this stage is the Primary Business Contact entered at step 7.

### Your Declaration and Electronic Signature

Required Documents Checklist

Required Documents Checklist

Administrator Name

Details	Document Name	Options
There are no required documents for this Online Application.		

Summary of fees

Application	Quantity	Price (CAD) per unit	Total (CAD)
LMIA-Exempt work permit Fee	1	\$230	\$230
Total Price (CAD)			\$230

Declaration of employer

I certify that I am actively engaged in the business in respect of which the offer of employment is made and understand that I must remain so during the period of employment for which the work permit is issued to the foreign national

I certify that I am compliant with, and will comply with, the federal/provincial/territorial laws that regulate employment and the recruitment of employees, in the province/territory in which it is intended that the foreign national's work and, if applicable, with the terms and conditions of any collective agreement.

I certify that I will provide the foreign national with employment in the same occupation as that set out in the foreign national's offer of employment and with wages and working conditions that are substantially the same as -- but not less favourable than -- those set out in the offer.

I certify that I will make reasonable efforts to provide a workplace that is free of abuse which includes physical, sexual, psychological or financial abuse.

I confirm that I have read and understood the contents of this form. I declare that the information that I have provided in this form is true, complete and accurate. I confirm that I understand that if I have made a false declaration or have otherwise provided false or misleading information the potential employee's application could be rejected. I further confirm that I understand that providing such false or misleading information, making a false declaration or failing to declare all information material to the potential foreign workers application could be an offense and/or constitute non-compliance under the Immigration and Refugee Protection Act.

Please select (required)

Signature

I agree that by submitting this application, I am electronically signing the application.

I, \_\_\_\_\_, solemnly declare that the information I have provided is true and that the documents I am submitting in support of my application are genuine and have not been altered in any way.

Given name(s)

Last name(s) (required)

Security Question

(required)

The compliance fee will auto-populate.

The person completing the form will need to add their first & last names. They are the 'signatory' for the offer of employment.

The security question is specific the person performing the data entry. This must be answered to proceed.

16. Select "sign" in order to move forward."



# Confirmation of Signature

## Signature

### Required Documents Checklist

Required Documents Checklist

Details	Document Name	Options
---------	---------------	---------

There are no required documents for this Online Application.

### Summary of fees

Application	Quantity	Price (CAD) per unit	Total (CAD)
LMI-A-Exempt work permit Fee	1	\$230	\$230
<b>Total Price (CAD)</b>			<b>\$230</b>

### Declaration of employer

I certify that I am actively engaged in the business in respect of which the offer of employment is made and understand that I must remain so during the period of employment for which the work permit is issued to the foreign national

I certify that I am compliant with, and will comply with, the federal/provincial/territorial laws that regulate employment and the recruitment of employees, in the province/territory in which it is intended that the foreign national's work and, if applicable, with the terms and conditions of any collective agreement.

I certify that I will provide the foreign national with employment in the same occupation as that set out in the foreign national's offer of employment and with wages and working conditions that are substantially the same as -- but not less favourable than -- those set out in the offer.

I certify that I will make reasonable efforts to provide a workplace that is free of abuse which includes physical, sexual, psychological or financial abuse.

I confirm that I have read and understood the contents of this form. I declare that the information that I have provided in this form is true, complete and accurate. I confirm that I understand that if I have made a false declaration or have otherwise provided false or misleading information the potential employee's application could be rejected. I further confirm that I understand that providing such false or misleading information, making a false declaration or failing to declare all information material to the potential foreign workers application could be an offense and/or constitute non-compliance under the Immigration and Refugee Protection Act.

### Please select (required)

I agree

### Signature

I agree that by submitting this application, I am electronically signing the application.

I, **name**, solemnly declare that the information I have provided is true and that the documents I am submitting in support of my application are genuine and have not been altered in any way.

[Exit Online Application](#)

[Transmit and Pay](#)

17. Assuming all is correct, select "Transmit and Pay"

## 18. Payment of Fees

First a summary screen will appear:

Print Help

### Summary of Fees

#### Summary of Fees for Nicole Hyatt

This table is a summary of your fees based on what you have applied for in your application. All fees are listed in Canadian dollars (CAD).

Application	Quantity	Price (CAD) per unit	Total (CAD)
LMA-Exempt work permit Fee	1	\$230	\$230

**Total Price (CAD) \$230**

THIS IS NOT A RECEIPT

You will be redirected to a different site to pay your fees. **You have 2 hours to complete your payment.** If you can't proceed with your payment right now, select "transmit and pay", and then select "cancel transaction". **Do not close your browser to exit.**

Your MyCIC session will **time out after 20 minutes.** If your session times out while you are paying your fees, your application is still submitted. Sign back in to your MyCIC account to view your acknowledgement of receipt letter. It may take a few hours for the letter to be sent to your account.

Transmit and Pay

Click and this will take you to the payment page.

Then you will be taken to a secure screen to enter your credit card information. Once you have entered and submitted this information a confirmation screen will appear.

## 19. Process Completed

### Congratulations! You have successfully submitted your application or profile.

Your Online Request For Enrolment in the CIC Portal Has Been Transmitted

What happens next?

- Step 1:** Citizenship and Immigration Canada will verify that you are eligible to enrol in the portal as an Employer using the information you have provided.
- Step 2:** You will be advised by e-mail of the result of your request for enrolment. It is important that you logout and close your browser before leaving your computer unattended. This is a precaution to ensure that no one else can access your personal information.
- Step 3:** Please take a few moments to rate your experience with us today.

Exit Questionnaire

This will be the final page you'll see once everything is done!

Return to the home page to review the Offer of Employment queue to retrieve the Offer of Employment Number. This number will appear in the left-hand column of the queue after CIC has reviewed (normally shortly after submission). Provide this number to the foreign national.