



5116-50th Avenue
 Box 1509
 Rocky Mountain House, AB
 T4T 1B2
 Phone: 403-845-2866

AAIP RRS Employer Application Form

Rocky Mountain House became a Designated Community under the Alberta Advantage Immigration Program- Rural Renewal Stream [AAIP RRS] To participate in Rocky Mountain House's RRS Program, Employers must be approved by the Town of Rocky Mountain House. Employers that are not willing to take an active role in supporting Endorsed Candidates' integration into the community of Rocky Mountain House **will not** be accepted into Rocky Mountain House RRS Program.

Employers shall not issue job offers to prospective Candidates under the AAIP RRS Program until:

1. The submission of a completed Employer Application Form and Town approval to participate is granted.
2. The job advertisement for each vacant position has been advertised for at least two consecutive weeks.

OFFICE USE ONLY		
AAIP RRS Employer Application #	Date Application Received	Approved Employer #

Business Name (Operating Name)		Business Number (Registered Number)	
Legal Corporate Name		NOC Code	
Business Type / Description			
Location of Business		Mailing Address	
Address:		Address:	
Town:		Town:	
Province:		Province:	
Number of Employees		Business Website Address	
Full Time		Seasonal	
Part Time		Remote	





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Owner of Business	General Business Contact Information
Owner Name: Phone Number:	Phone Number: Fax Number:

Business's Rural Renewal Stream Program Main Contact
Name: Title: Email Address: Phone Number:

Regulatory Information

Does the Employer have a valid Town of Rocky Mountain House Business License?	Yes	No
Has the Employer been documented for any violations through Alberta Health Services within the last two years?	Yes	No
Has the Employer received any Occupational Health and Safety complaints within the last two years?	Yes	No
Is the Employer in good standing with the Worker's Compensation Board of Alberta?	Yes	No
Is the Employer in good standing with Immigration, Refugees and Citizenship Canada?	Yes	No

Immigration Support

Does the Employer have experience working with other Federal and Provincial Immigration program? If yes, please explain:
Please describe how the Employer offers a safe a welcoming working environment? Attach OH&S Program, Codes of Conduct, Policies/Procedures, etc.

Telephone 403-845-2866 Fax 403-845-3230
Webpage: www.rockymtnhouse.com E-mail: rockyruralrenewal@trmh.ca





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Position Details

Does the job(s) meet the requirements of the Rural Renewal Stream?	
Job is full-time (min 30 hours per week)	Job is year round
Wage and benefits meet or exceed the lowest starting wage across industries in Alberta	Job is permanent (12 months or more)
Is the potential Candidate already employed? If yes, please skip the next 2 questions.	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide a brief description of the position(s) the employer is currently recruiting for and attach the vacant job(s) postings.	
Describe all recruitment efforts to fill the position in Canada. Describe advertising places, posting durations, and recruitment results:	





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Employer Declaration

I, _____ [Name] the _____ [Title]
 of _____ [Business Name] in Rocky Mountain House, Alberta, am
 authorized to sign on behalf of the business and solemnly declare that all information provided in
 this Employer Application Form is true, accurate and complete and that the Employer:

- Is located permanently within the municipal limits of Rocky Mountain House, AB;
- Has considered Canadians and Permanent residents for the subject position;
- Is offering a job which is full-time [minimum 30 hours per week], non- seasonal and permanent [minimum 12 months];
- Is offering a job which meets or exceed the lowest starting wage for the occupation across all industries in Alberta as setout in the [Alis website](#);
- Confirms that the majority of the job duties will be performed within the municipal limits of Rocky Mountain House;
- Is not known to be in violation of any Federal or Provincial legislation;
- Agrees and abides by the rules and guidelines of the Rocky Mountain House Rural Renewal Stream program;
- Has reviewed and will comply with the eligibility requirements under the Alberta Advantage Immigration Program- Rural Renewal stream program;
- Will review and confirm eligibility requirements with any prospective Candidates prior to issuing an offer of employment, including admissibility requirements under the Immigration and Refugee Protection Act and its Regulations;
- Understand that they are solely responsible for compliance with all relevant business licensing and compliance with all Town bylaws;
- Understand that misrepresentation could result in disqualification from Rocky Mountain House’s RRS program; and
- Understands that as the Employer, I am responsible to take the lead role in providing settlement services to Endorsed Candidates, including adorable accommodation.

Employer Name		Date	
Employer Signature			
Witness Name		Date	
Witness Signature			





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General Liability Release and Indemnity

The Employer does hereby WAIVE, RELEASE, and FOREVER DISCHARGE the Town of Rocky Mountain House, their agents, employees, volunteers, successors and assigns and any all persons, firms or corporations liable or who might be claimed to be liable, whether or not herein names (the "Releases", from all injury that may be sustained while participating in the Rocky Mountain House Rural Renewal Stream (collectively "Programs"), or while employing anyone in relation to the Programs, regardless of whether such loss or damage is caused by the negligence of the Releases, or otherwise, and regardless if whether such liability arises in tort, contract, strict liability, or otherwise, to the fullest extent allowed by law. It is my express intent that this General Liability Release shall bind the members of my family, spouse, my heir, assigns and personal representative, and shall be deemed as a RELEASE, WAIVER, DISCHARGE and COVENANT NOT TO SUE the above named releases as stated above. In signing this Application, I acknowledge and represent that I have read the foregoing General Liability Release and Indemnity agreement, understand it and sign it voluntarily as my own free act and deed; no representations, statement or inducement has been made; I am at least eighteen (18) years of age and fully competent; and I execute this Application for full, adequate and complete consideration fully intending to be bound by the same.

Employer Name		Date	
Employer Signature			
Witness Name		Date	
Witness Signature			

The personal information that you provide to the Town of Rocky Mountain House on this form is being collected under the authority of the Freedom of Information and Protection of Privacy (FOIP) Act. Collected personal information is protected from unauthorized access, collection, use and disclosure in accordance with the FOIP Act. Questions about the collection or use of this information can be directed to the Town of Rocky Mountain House FOIP Coordinator at 403-845-2866 or by email at legislative@trmh.ca.





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Is the Employer located within the municipal limits of Rocky Mountain House?			Yes No
Is the Employer an existing Employer in Rocky Mountain House with business premises?			Yes No
Does the Employer have a valid Town of Rocky Mountain House Business Licence?			Yes No
Business Licence Number		Date of Issue	
Received information regarding any AHS violation from the Employer?			Yes No
Received information regarding any OHS complaint(s) from the Employer?			Yes No
Received information regarding any issues with WCB from the Employer?			Yes No
Received information regarding any issues with IRCC from the Employer?			Yes No
The Employer has experience with Fed. Or Prov. Immigration Programs?			Yes No
The Employer has effectively described their safe workplace environment?			Yes No
Employer Application has been approved for participation in Rocky's RRS program?			Date
Employer Application refused for the following reasons:			
Signature of Economic Development Coordinator:			
Signature of Economic Development Officer:			
Date Employer was notified of the Endorsement Letter Application decision:			

