General Information

Note: In order to simplify the text, the terms and expressions used include both grammatical genders.

The Financial Self-Sufficiency Contract is a legal instrument by which you agree to provide for your essential needs and, where applicable, those of the persons accompanying you to Québec, namely your spouse or your and common-law partner and your dependent children, including those who are Canadian citizens, where applicable. It takes effect on the day you arrive in Québec as a permanent resident and is valid for three months.

The essential needs covered by the contract include, among other things, food, accommodation, clothing and any other personal needs.

As required by the Québec Immigration Act and the Regulation Respecting Immigration to Québec, you must **subscribe to this contract**, **failing which your application for permanent selection will not be accepted**.

Who must complete this form?

You must complete this form if you are in any of the following situations:

- you apply for permanent selection under the Regular Skilled Worker Program and submit this application as the principal applicant;
- you are already in Québec to study or work temporarily and have applied for permanent selection under the Regular Skilled Worker Program.

If your spouse or common-law partner is accompanying you, you must provide the requested information and have them co-sign the form if you apply for selection under the Regular Skilled Worker Program.

How to complete this form

This **Financial Self-Sufficiency Contract** has two sections. In Section A, you must provide the requested information about yourself and the persons accompanying you, if applicable. You must answer all questions accurately.

Section B is your commitment. You must read it carefully and sign it. Do not forget to enter, in point 1, the amount you will have at your disposal when you arrive in Québec to support yourself and the people accompanying you, if applicable.

Depending on whether your spouse and dependent children are accompanying you or not, you must apply a different scale to calculate the minimum amount you must have to provide for your essential needs during the **three months** following your arrival in Québec and those of the persons accompanying you, if applicable.

You must send us the Financial Self-Sufficiency Contract (sections A and B of this form) duly completed and signed with your selection request. Please, **do not attach** the two pages of general information to your mailing.

Current scales

The current scales are available at the following address: https://cdn-contenu.quebec.ca/cdn-contenu/immigration/formulaires/ fr/bareme autonomie financiere programmes immigration.pdf

A. Identity Information

Indicate your surname(s) and ▶ 1. Principal applicant given name(s) in block letters as the

they appear in your passport.	Gender Female Male					
	1					
	Family name at birth	First name(s)				
	Family name after marriage (if applicable)	Family name after marriage (if applicable) or other names you use or are known by				
	Date of birth (year/month/day)					
	Home address					
	1 11					
	Number Street	Apartment City				
	Province or State Postal code	Country or territory				
		Country of territory				
	Telephone					
	Home phone Work phone	Other phone				
	Email address					
	Current martial status					
	Single Married Common-law partner Sep	parated Divorced Annulled marriage Widowed				
	Have you been married more than once? Yes No					
	If your spouse or common-law partner is accompanying you, you must provide the requested information about their identity.					
If your spouse or common-law partner is accompanying you,	2. Spouce					
you must provide the requested information about their identity.	Gender Female Male					
	Family name at birth	First name(s)				
	1					
	Family name after marriage (if applicable)	Other name(s) you use or by which you are known (if applicable)				
	Passport No.					
	Home address					
	Number Street	Apartment City				
	Province or State Postal code	Country or territory				
	TOVINCE OF State POStal Code	Country of territory				

Financial Self-Sufficiency Contract

You must include all your accompanying dependent children, including those who are Canadian citizens.

IMPORTAN: If more than three children are accompanying you, make a photocopy of this page, complete it and attach it to the

3. Dependent child(en)							
First child							
Gender	Female	Male					
				1			
Family name at b	irth			First name(s)			
Date of birth (yea	r/month/day)						
Date of birtii (yea	i/iiioiitii/uay)						
Home addr	Home address (if different from yours)						
					1		
Number	Street			Apartment	City		
Province or State			Postal code		Country or territory		
Second chil	<u>d</u>						
Gender	Female	Male					
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Family name at b	irth			First name(s)			
Date of birth (yea	ar/month/day)						
Home addr	ess (if differ	ent from yours)					
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Number	Street			Apartment	City		
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Province or State			Postal code		Country or territory		
Third child							
Gender	Female	Male					
Family name at b	irth			First name(s)			
5 . (11.1.4	()(()						
Date of birth (year/month/day)							
Home address (if different from yours)							
1			I		1		
Number	Street			Apartment	City		
L			<u></u>				
Province or State			Postal code		Country or territory		

Enter in the space provided the amount you calculated according to the scale that applies to your situation. If you do not enter this amount, your contract will not be valid. See the General Information section.

IMPORTANT: ► B. Undertaking

I acknowledge that I have read the information contained in this Financial Self-Sufficiency Contract and I understand its nature and scope. As a result:

1. I declare that I will have, for the duration of this contract, which is three months from the date of obtaining permanent residence, sufficient financial resources to support myself and the persons accompanying me, as required by the Québec Immigration Regulation, namely the sum of

Canadian dollars.

- 2. I undertake to provide for my essential needs and those of the persons mentioned in Section A throughout the term of this contract.
- 3. I authorize the Ministère de l'Immigration, de la Francisation et de l'Intégration (Ministère) to forward to the Ministère du Travail, de l'Emploi et de la Solidarité Sociale the information relating to this agreement, in the event that a request for lastresort financial assistance is made against me or against one or more of the persons included in my application.
- 4. I undertake to reimburse the Government of Québec for any amount that the latter may grant to me or to the persons mentioned in section A, as last-resort financial assistance benefits, in accordance with applicable legislation, for the entire duration of the contract.

In witness whereof, I have signed in

City	Country or territory	Date (year/month/day)
Signature of the main applicant		
In witness whereof, I have signed in		
City	Country or territory	Date (year/month/day)

Please sign this form in duplicate and send us one of the copies with your application for permanent selection.

Your spouse must also sign the
Signature of the spouse commitment.