



YUKON NOMINEE PROGRAM
NOMINEE PARTICIPANT MONITORING FORM

Date: YYYY/MM/DD YNP file: _____

The Yukon Nominee Program (YNP) conducts monitoring of the employer/employee relationship to:

- Ensure that the program is working efficiently;
- Ensure that the terms of the Tri-partite Agreement (TPA) are complied with;
- For purposes of quality assurance; and
- To improve the program.

This form is in fillable PDF format which can be sent electronically, or alternatively, printed and filled in manually. Please return this form by email, mail or fax to the following:

Yukon Nominee Program
Government of Yukon, Economic Development (F-1)
PO Box 2703, Whitehorse, Yukon, Y1A 2C6
Email: ynp.monitoring@yukon.ca

Personal information on this form is being collected under the authority of the Agreement for Canada-Yukon Co-operation on Immigration and will be managed in accordance with the *Access to Information and Protection of Privacy (ATIPP) Act* section 15(1)(c) for the purpose of carrying out a program. For more information about the collection, use and disclosure of your personal information, please contact Yukon Immigration in writing at Economic Development, Box 2703 (F-1), Whitehorse YT, Y1A 2C6, or by phone at 867-667-5131 or toll free at 1-800-661-0408 ext. 5131.

Employee name		Employee signature	
Employer/business name			
<input type="checkbox"/> Skilled worker	<input type="checkbox"/> Critical impact worker	Approval date YYYY/MM/DD	Start date YYYY/MM/DD

1) Do the **duties and tasks** you perform in your position match those agreed to in the job description and/or employment contract? Yes No

Comments:

2a) Are you working the **hours agreed upon** in the TPA? If no, why not? Yes No

2b) Do you work **overtime**? If yes, how often? Yes No

Comments:

2c) Are you **compensated** for overtime as per [Yukon Employment Standards Act \(YESA\)](#)? Yes No

3a) Are your **wages** consistent with the TPA terms? Yes No

3b) Are **all deductions** made in accordance with the TPA terms? Yes No

Comments:

4) **For nominees traveling from overseas to work in the Yukon:** Has the employer reimbursed you for travel costs to Yukon? Yes No

Comments:

5a) Do you have suitable living accommodations? Yes No

5b) Did your employer help you find suitable housing? Yes No

Comments:

6a) Has your employer provided health insurance benefits for your first 3 months of residency? Yes No

6b) You qualify for Yukon Health Care after 3 months of residence. [Have you applied?](#) Yes No

Comments:

7a) In general, are you satisfied with your working conditions? Yes No

7b) Are you aware of your rights as a worker? Check all that apply:

- [Working in Yukon - A guide for foreign workers Employment rights and responsibilities](#)
- [Ready to Work Program](#)
- [Yukon Employment Standards](#)
- [Yukon Occupational Health and Safety Act and Regulations](#)
- [Yukon Human Rights Act](#)

Comments:

7c) Have you attended the YNP orientation session for new nominees? If no, why not? Yes No

7d) Have you signed any agreement or contract with your employer other than the TPA? Yes No

If yes, provide details.

Comments:

8a) Are you aware of settlement services in your community? (e.g.: English classes, government services, referrals, transportation options, translation services, etc.) Yes No

8b) Do you have any questions or concerns about your employment? Yes No

Comments:

8c) Do you have any other questions or concerns? Yes No

Comments:

9a) Have you begun your permanent resident application? If no, why not? Yes No

Comments:

You must apply for permanent residence no later than three to six months after signing your TPA.

What stage are you at in your permanent resident process?

Comments:

9b) Date when you applied for permanent residence? YYYY/MM/DD

Monitor follow-up / comments	
Comments:	
Reviewed by	Date YYYY/MM/DD

When submitting this form by email, follow the instructions on your screen.

Ensure that you print a second copy for your records as you might not be able to save the content of this form.