

General Information

Do not include the two General Information pages in your submission. Send us only the Contract respecting financial self-sufficiency (Sections A and B of this form), duly completed and signed.

Definition

The **Contract respecting financial self-sufficiency** is a legal agreement by which you undertake to provide for your basic needs and, where applicable, those of your spouse and dependent children accompanying you to Québec, including those who are Canadian citizens. It comes into effect on the day that you arrive in Québec as a permanent resident and is valid for a period of three months.

The basic needs covered by this contract include food, housing, clothing and all other personal necessities.

As required by the Act respecting immigration to Québec and the Regulation respecting the selection of foreign nationals, you must **sign this contract or else your application for a selection certificate cannot be accepted.**

This form must be completed if you are in one of the following situations:

- You belong in the subclass of Skilled Workers, Entrepreneurs or Self-Employed Persons and you are submitting an application for a Certificat de sélection du Québec as a principal applicant;
- You are already in Québec to study or work temporarily and you have submitted an application for a Certificat de sélection du Québec in the Skilled Worker subclass.

If your spouse (by marriage or de facto union) is accompanying you, you must provide the requested information on him or her and have him or her co-sign the form if you are applying for a selection certificate in the Skilled Worker subclass.

This form does not apply to you if you are a live-in caregiver or if you have obtained authorization from Citizenship and Immigration Canada to apply for permanent residence in Canada on humanitarian grounds. If you are in this situation, you must fill out [form A-0522-PA](#).

This **Contract respecting financial self-sufficiency** has two sections. In Section A, you must provide the requested information about yourself and any persons accompanying you. Answer all questions accurately.

Section B constitutes your undertaking. Read it carefully and sign it. Do not forget to **enter, at Point 1, the amount at your disposal when you arrive in Québec to support your needs and those of any persons accompanying you.**

Important

Depending on whether or not your spouse and dependent children are accompanying you, you must apply a different scale to calculate the minimum amount that you need to have to support your basic needs and theirs for **three months** following your arrival in Québec.

Here are the scales in force from January 1 to December 31, 2017.

Adults without children

Situation	Scale in CA \$
1 adult (principal applicant)	\$3,085
2 adults (principal applicant and accompanying spouse)	\$4,525

Adults with accompanying dependent children

Number of dependent children	Scale in CA \$
1 adult (principal applicant) and	
– 1 child under 18 years old	\$4,146
– 2 children under 18 years old	\$4,680
– 3 children under 18 years old	\$5,214
– More than 3 children under 18 years old: add	\$534 per child
– 1 child (or more) aged 18 or older : add	\$1,439 per child
2 adults (principal applicant and accompanying spouse) and	
– 1 child under 18 years old	\$5,069
– 2 children under 18 years old	\$5,470
– 3 children under 18 years old	\$5,872
– More than 3 children under 18 years old: add	\$402 per child
– 1 child (or more) aged 18 or older : add	\$1,439 per child

Examples of calculations

Number of accompanying dependent children		Amount required	Total
1 adult and	1 child under 18 years old 1 child aged 18 years or older	\$4,146 + \$1,439	\$5,585
1 adult and	4 children under 18 years old	\$5,214 + \$534	\$5,748
2 adults and	3 children under 18 years old	\$5,872	\$5,872
2 adults and	2 children aged 18 years or older	\$4,525 + (\$1,439 x 2)	\$7,403



A – IDENTITY INFORMATION

Fill out all spaces in ink
and in block letters.

1. Principal applicant

Sex Female Male

Family name at birth | First name

Family name after marriage (where applicable) | Other family or first names that you use or by which you are known (where applicable)

Date of birth (year-month-day)

Home address

Number | Street | Apartment

City | Province or state | Postal code | Country or territory

Téléphone

Home telephone | Work telephone | (Ext) | Other

E-mail

Check the box that corresponds
to your family situation.
Notify us immediately of any
change in your marital status.

Marital status

Single (never married and not in a de facto union)

or

Married De facto spouse Separated Divorced

Marriage annulled Widowed

Don't forget to enter the date. ▶ Since (year-month-day) Is this your only marriage? Yes No

If your spouse (by marriage or
de facto union) is accompanying
you, you must provide
the requested information
on his or her identity.

2. Spouse

Sex Female Male

Family name at birth | First name

Family name after marriage (where applicable) | Other family or first names that you use or by which you are known (where applicable)

Date of birth (year-month-day)

2. Spouse (cont'd)

Home address (if different from yours)

Number	Street	Apartment	
City	Province or state	Postal code	Country or territory

Include all your dependent children who are accompanying you, including those who have Canadian citizenship.

IMPORTANT: If more than three children are accompanying you, make a photocopy of this page, fill it out and attach it to the form.

3. Dependent children

First child

Sex Female Male

Family name at birth	First name
Date of birth (year-month-day)	

Home address (if different from yours)

Number	Street	Apartment	
City	Province or state	Postal code	Country or territory

Second child

Sex Female Male

Family name at birth	First name
Date of birth (year-month-day)	

Home address (if different from yours)

Number	Street	Apartment	
City	Province or state	Postal code	Country or territory

Third child

Sex Female Male

Family name at birth	First name
Date of birth (year-month-day)	

Home address (if different from yours)

Number	Street	Apartment	
City	Province or state	Postal code	Country or territory

B – UNDERTAKING

I acknowledge that I have read the **General Information** section of this form and that I understand the nature and scope of the contract respecting financial self-sufficiency. Consequently:

1. I declare that, upon my arrival in Québec as a permanent resident, I will have sufficient financial resources to provide for my needs and those of persons accompanying me for at least three months, as required by the Regulation respecting the selection of foreign nationals, specifically _____ Canadian dollars.
2. I undertake to provide for my basic needs and those of the persons declared in Section A during the full term of this contract.
3. I authorize the Ministère de l'Immigration, de la Diversité et de l'Inclusion to provide information concerning this contract to the Ministère de l'Emploi et de la Solidarité sociale if any application is made for last-resort financial assistance for me or any of the persons declared in Section A.
4. I undertake to reimburse the Government of Québec for any amount that it may grant to me or to the persons declared in Section A in the form of last-resort financial assistance, in accordance with applicable legislation, during the full term of the contract.
5. If I applied for a Certificat de sélection du Québec as a skilled worker, I acknowledge that I am aware that the Ministère, after examining my file, may choose to designate my spouse as principal applicant if this proves more advantageous for us in terms of points granted on the selection grid, and that, where applicable, this contract will bind only the one of us who will act as principal applicant.

IMPORTANT: Enter in the space provided the amount that you calculated based on the scale applicable to your situation. If you do not enter this amount, your contract will not be valid. Consult the General Information section.

This clause does not apply to you if you belong in the entrepreneur or self-employed person class.

In witness whereof, I have signed at _____ on _____
City and country or territory Date (year-month-day)

Please sign this form in two copies and send us one copy with your application for a selection certificate.

► **Signature**

Signature of the principal applicant

In witness whereof, I have signed at _____ on _____
City and country or territory Date (year-month-day)

Your spouse must also sign the undertaking if you applied for a selection certificate as a skilled worker.

► **Signature**

Signature of spouse (if the application for a Certificat de sélection du Québec is presented in the Skilled Worker subclass)