

## **The Rural Community Immigration Pilot (RCIP):**

### **Request for Formal Reconsideration**

This form is to be used by employers or candidates who have applied to the Rural Community Immigration Pilot (RCIP) project in the North Okanagan-Shuswap community and wish to have a formal RCIP decision reconsidered.

Only formal decisions (decisions in writing and/or referring to the formal outcome of an application) are eligible to be reconsidered. These decisions include:

- Decline to recommend a candidate
- Revocation of a Recommendation
- Refusal to designate an employer
- Recalculating assigned points
- Note: this procedure does not apply to program integrity decisions

Requests to reconsider a decision must be made by the affected candidate, applicant and/or employer. For example, a request to reconsider a declined recommendation can only be made by the applicant and a refusal to designate an employer can only be made by the employer (the affected party).

After a request for reconsideration has been submitted, the applicant/employer may not submit another application until the reconsideration decision has been made and finalized.

Please note: If an employer/applicant would like to have a reconsideration of a program integrity decision, they are required to follow the Program Integrity Policy and Procedures (PIP25) found on our website.

Please only complete the sections relevant to your request.

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It is important to note that all requests must be signed and dated by hand in ink. We will not accept unsigned requests, nor we will accept electronic signatures.

Section1: Details – Employer

**Business Name:**

**Address of Business:**

**Designation # (if applicable):**

**Contact Name:**

**Contact Email:**

**Decision you wish to have reconsidered:**

**Date of Decision:**

**Reason for Reconsideration:**

Section 2: Details – Candidate/Applicant

**Name:**

**Phone Number:**

**Email:**

**Address in Community (if applicable):**

**Employer in the Community:**

**Community Application #:**

**Decision you wish to have reconsidered:**

**Date of Decision:**

**Reason for Reconsideration:**

### Section 3: Declaration and Signature

I acknowledge that:

- this request falls within community policy IRP25 and will be processed according to the policy and procedures therein
- submitting a request for reconsideration does not entitle you to a different outcome
- only one reconsideration request can be made per formal decision, and the result of the reconsideration request becomes final
- the applicant/employer may not submit another application until the reconsideration decision has been made and finalized.
- any threatening language found within this request may result in additional action being taken and/or reports made to relevant authorities
- the information presented herein is true and correct to the best of my knowledge

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTE: By submitting an email to us, you acknowledge and accept that email is not a fully secure method of communication. You understand that any sensitive or confidential information submitted via email is transmitted at your own risk, and we cannot guarantee its security during transmission.**