

NOTE* All Temporary Foreign Workers **must** complete and send this form to the address listed below **within 7 working days** upon arriving in Alberta, Canada.

APPLICANT INFORMATION

(PLEASE PRINT)

Applicant Name		
AIT ID #	Date of Arrival in Alberta (YYYYMMDD)	
Mailing Address in Alberta		
City	Postal Code	Alberta Phone Number ()

EMPLOYER INFORMATION

Company Name		Employment Start Date (YYYYMMDD)
Employer Site Address		
City	Postal Code	Employer Phone Number ()

In which office would you like to write your exam? _____

Do you require an interpreter? () Yes () No

There are 3 options on how to submit your arrival form:

- By postal mail:
Assessment, Certification and Examination Services
10th Floor Commerce Place
10155 – 102 Street
Edmonton, AB T5J 4L5
- By fax: **(780) 422-7376**
- By email: **tfwinfo@gov.ab.ca**