



OASIS 国际技术工人用户指南 医疗保健意向书简介

如需了解更多信息，请联系

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导言

欲了解有关意向书系统的更多信息，请访问网站：www.saskatchewan.ca/healthcare-eoi

您必须在 SINP 的在线申请系统 OASIS 上注册并创建账户，才能创建 EOI 档案。请参阅第 1 部分，了解注册说明。

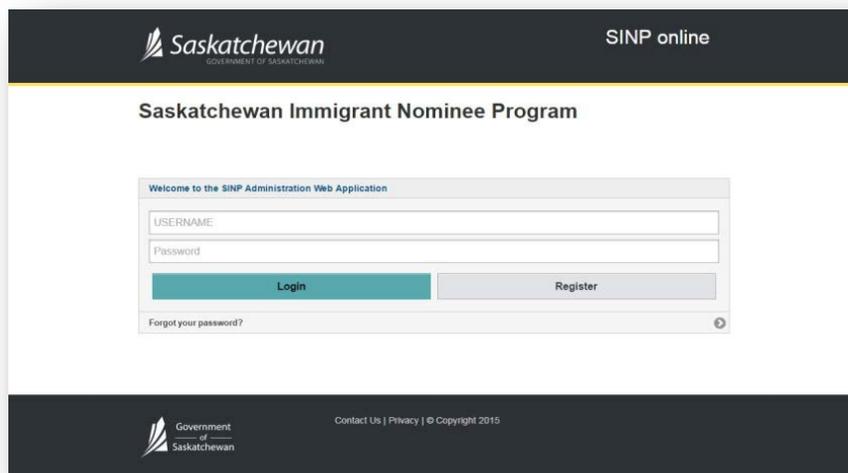
本指南分为 6 个部分，概述了创建和提交意向书 (EOI) 的步骤：

1. 创建 OASIS 账户
2. 输入个人信息
3. 确定您的资格和子类
4. 完成 EOI 积分网格
5. 申报顾问（如适用）
6. 审查和提交意向书

第 1 部分：创建 OASIS 账户

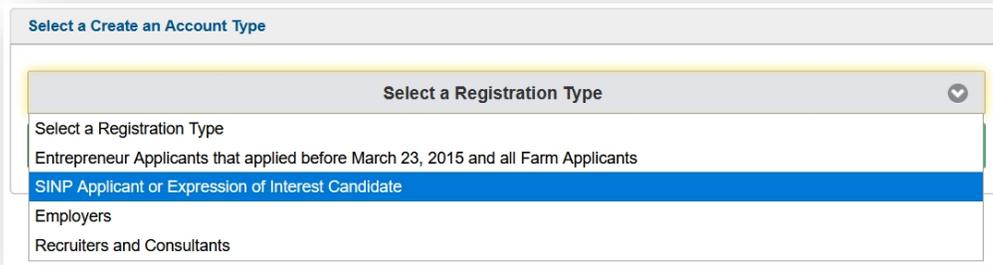
如果您之前的申请尚未处理，则无需创建新账户。请参阅第 2 部分继续。

- 点击以下链接进入 SINP 在线申请系统：<https://immigration.saskatchewan.ca/>



- 点击注册。

- 单击选择注册类型。



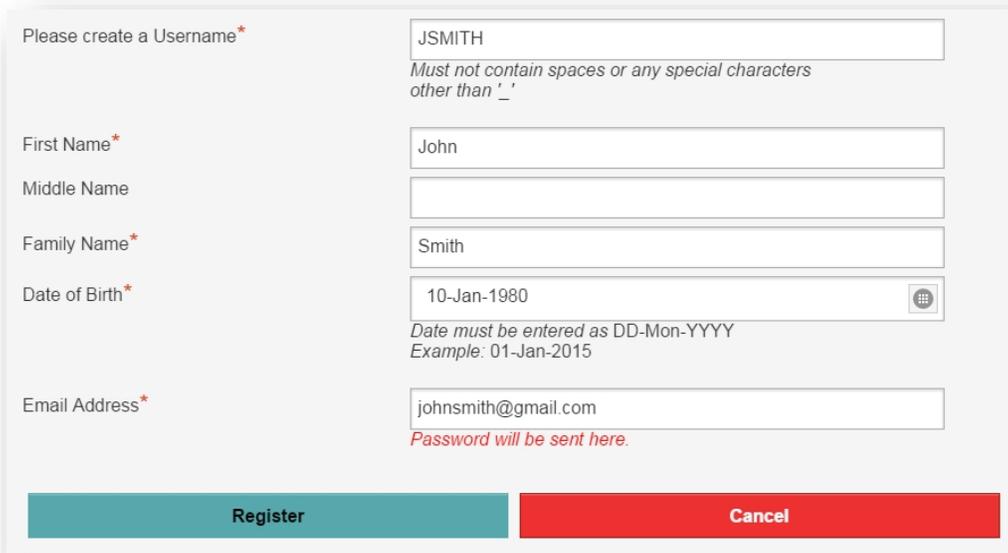
- 选择合适的注册类型，然后单击 "继续":
申请人: SINP 申请人或意向书候选人
- 创建用户名。用户名不得包含空格或下划线 ('_') 以外的任何特殊字符。您的用户名将用于访问您的 OASIS 账户。

请在空白处用户名。请使用标题大小写输入所有其他内容。

- 输入您护照上的名、中名和姓。
- 输入您的出生日期 (日期-月-年)。
- 输入您的电子邮件地址。



此电子邮件地址将用于今后与您的 OASIS 申请有关的所有通信，包括密码恢复。



Please create a Username*

JSMITH
Must not contain spaces or any special characters other than '_'

First Name*
John

Middle Name
[Empty]

Family Name*
Smith

Date of Birth*
10-Jan-1980
*Date must be entered as DD-Mon-YYYY
Example: 01-Jan-2015*

Email Address*
johnsmith@gmail.com
Password will be sent here.

Register **Cancel**

- 点击注册。

登录 OASIS 的信息。

Your username and password are:

Username: JSMITH

Password: *p65T

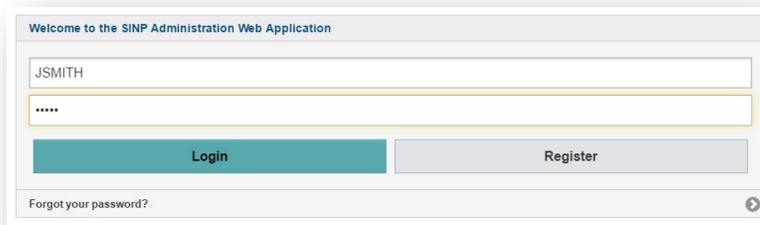
This user name and password will allow you to create and submit your application with the SINP.

Note - The password is case sensitive.

您将收到一封包含用户名和密码的电子邮件。您需要

- **登录 OASIS**

在登录页面，输入电子邮件发送的用户名和密码，然后点击登录。



然后系统会提示您更改密码。

请注意以下密码要求：

- 至少有八个字符；
- 至少包含以下三个类别的字符：
 - 英文大写字母 (A - Z) ；
 - 英文小写字母 (a - z) ；
 - 数字 (0 - 9) ；
 - 非字母数字符号 (如: !)
- 不包含用户的账户名。

Password Expired

The password on your account has expired. Please use this form to change your password.

Password Standards

Account passwords must, at a minimum:

- have at least eight characters;
- contain characters from at least three of the following categories:
 - English uppercase letters (A – Z);
 - English lowercase letters (a – z);
 - Numbers (0 – 9);
 - Non-alphanumeric symbols (e.g.: !, #, \$, %)
- not contain your user's account name.

Current Password

New Password

New Password (Confirm)

- 披露个人信息的权力

点击 "我同意 "按钮, 即可获取相关信息。

AUTHORITY TO DISCLOSE PERSONAL INFORMATION

All users must agree to disclose information as stated below in order to continue.

I understand that the information collected, used and stored within the Saskatchewan Immigrant Nominee Program (SINP) Online Application System (OASIS) constitutes personal information and is subject to the provisions of The Freedom of Information and Protection of Privacy Act and relevant regulations.

I understand that unauthorized access to OASIS is strictly prohibited, and the information contained within is to be used and/or disclosed exclusively for the purposes for which it was acquired, or in accordance with the Acts listed above. Any use or disclosure of this information for any other purpose may result in prosecution.

I confirm my understanding of all the previous statements and have asked for and received an explanation, or language translation if required, of every point that was not clear to me.

I AGREE

为了继续登录 OASIS, 所有用户都必须同意披露以下信息

- 找回用户 ID 或密码

要恢复账户访问权限, 请在登录页面点击 "忘记用户 ID 或密码?", 然后选择恢复方法。

Forgot your User ID or Password?

1. To recover your password:
Simply enter your User ID by choosing "User ID" as recovery method and click "Submit". New temporary password will be sent to the email address associated with your account.
2. To recover your username:
Simply enter your Email Address by choosing "Email" as recovery method and click "Submit". List of associated usernames will be sent to the entered email address. This will not reset password of any associated account(s). To reset the password of your specific account, follow the instructions of step 1.

Recovery Method:

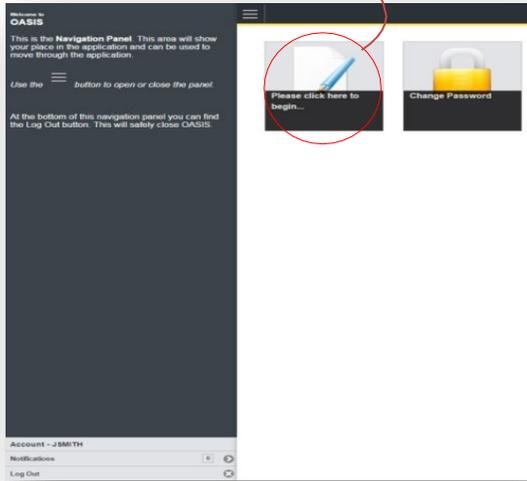
Submit

选择 "用户 ID "重置密码。系统会要求您输入创建账户时使用的用户名。一封包含用户名和临时密码的电子邮件将发送到与用户 ID (或用户名) 关联的电子邮件地址。

如果要使用使用过的电子邮件地址恢复账户, 请单击 "电子邮件 "作为恢复方法。与您的电子邮件地址相关联的用户名列表将通过电子邮件发送给您。要重置密码, 需要使用恢复方法 "用户 ID "执行上一步操作。

第 2 部分：输入个人信息

- 点击 "请单击此处开始" 按钮



- 填写下面要求的所有申请人信息和护照详细信息：

Birthdate and Address Info for Matthew Leier

Please enter the applicant's personal contact information and birth date in the fields below. If the applicant has a representative that will be conducting business on their behalf, the representative's contact information should be provided on the federal Use of a Representative (IMM5476) form.

At any time you can click the  to the right to save your responses.

Once you have entered your information, please click the 'Continue to Next Section' button above. If you do not see the button, you have not saved all the required fields.

Prefix*	<input type="text"/>
<i>fx</i> Given Name	<input type="text" value="Matthew"/>
<i>fx</i> Middle Name	<input type="text"/>
<i>fx</i> Surname	<input type="text" value="Leier"/>
Gender*	<input type="text"/>
Marital Status*	<input type="text"/>
<i>fx</i> Date of Birth	<input type="text" value="01-Dec-1960"/> <small>Date must be entered as DD-Mon-YYYY Example: 01-Jan-2015</small>
Passport Number*	<input type="text"/>
Passport Expiry Date*	<input type="text" value="DD-Mon-YYYY"/>
Intended Destination for Settlement	<input type="text"/>
In which country do you currently reside?*	<input type="text"/> <small>(Your source country will not impact your chances of being invited to apply to the SINP. This information will be used to notify you of any recruitment missions in your country.)</small>

- 填写住宅/家庭地址：

Residential/Home Address

Address Line 1*

Address Line 2

Address Line 3

City / Town*

Province/State*

Postal Code

Country*

如果您的家庭住址在加拿大境外，请在省/州下选择国际/加拿大境外，然后输入您所在的省份。

Province/State*

If International, please specify province or state name

如果您的家庭地址与邮寄地址相同，请在 "邮寄地址是否与住宅/家庭地址相同？"

Is the mailing address the same as the Residential/Home Address* Yes No

Selecting "Yes" will copy your residential address into the mailing address.

- 如果与家庭住址不同，请填写邮寄地址和电话号码：

Mailing Address

Address Line 1*

Address Line 2

Address Line 3

City / Town*

Province/State*

Postal Code

Country*

Telephone Number

Email Address*

The Applicant's Email Address is a required field and must include the applicant's email address for the application to be considered complete. The application may be subject to an integrity review for misrepresentation if the email address entered in the Applicant's Email Address is not the applicant's email address.



申请人的电子邮件地址是必填字段，必须包含申请人的电子邮件地址，申请才算完整。如果在 "申请人电子邮件地址" 中输入的电子邮件地址不是申请人的电子邮件地址，申请可能会因虚假陈述而受到诚信审查。

- 请选择一个适合您的选项：

<input type="radio"/> I am a skilled worker who wants to work and live in Saskatchewan.
<input type="radio"/> I am a foreign national currently working and living in Saskatchewan.
<input type="radio"/> I want to establish and actively operate a business in Saskatchewan.

- 如果要指定代表，请选择 "是"，否则请选择 "否"。

Do you have a representative that will be conducting business on your behalf with Immigration, Refugees and Citizenship Canada (IRCC), the Immigration and Refugee Board (IRB), Canada Border Services Agency (CBSA) and the Saskatchewan Immigrant Nominee Program(SINP)? *	Yes	No
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- 如果选择 "是"，请填写顾问的电子邮件地址

Do you have a representative that will be conducting business on your behalf with Immigration, Refugees and Citizenship Canada (IRCC), the Immigration and Refugee Board (IRB), Canada Border Services Agency (CBSA) and the Saskatchewan Immigrant Nominee Program(SINP)? *	Yes	No
Email address for Consultant *	<input type="text"/>	

- 点击下面的链接，了解使用代表的相关信息：

<https://www.saskatchewan.ca/residents/moving-to-saskatchewan/provide-immigration-services/immigration-consultant-and-foreign-worker-recruiter-licensing-and-responsibilities>

点击

Continue to Next Section

继续。

第 3 部分：确定您的资格和子类

- 您必须回答本页的一系列问题，以确定资格和申请类别。首先，要提交医疗保健 EOI，您必须选择一个[符合条件的职业](#)。

The screenshot shows a web form with several questions and a dropdown menu. The questions are:

- Are you applying for the Saskatchewan Graduate Temporary Measure? (Yes/No)
- Do you have a current job offer? (Yes/No)
- Have you been accepted into Immigration, Refugees and Citizenship Canada's Express Entry pool and have an Express Entry Profile Number? (Yes/No)
- Please select your intended occupation*

The dropdown menu for occupation selection is open, showing a list of occupations under the heading "4011 - University professors and lecturers". The list includes:

- 2253 - Information systems testing technicians
- 3012 - Registered nurses and registered psychiatric nurse
- 3122 - Chiropractors
- 3124 - Allied primary health practitioners
- 3131 - Pharmacists
- 3141 - Audiologists and speech-language pathologists
- 3142 - Physiotherapists
- 3143 - Occupational therapists
- 3211 - Medical laboratory technologists
- 3212 - Medical laboratory technicians and pathologists' assistants
- 3214 - Clinical perfusionists and cardiopulmonary technologists
- 3215 - Medical radiation technologists
- 3216 - Medical sonographers
- 3217 - Cardiology technologists and electrophysiological diagnostic technologists, n.e.c.
- 3219 - Other medical technologists and technicians (except dental health)
- 3223 - Dental technologists, technicians and laboratory assistants
- 3233 - Licensed practical nurses
- 3234 - Paramedical occupations
- 3237 - Other technical occupations in therapy and assessment
- 3413 - Nurse aides, orderlies and patient service associates

Red text on the form reads: "Please check to see if your occupation is regulated or requires professional certification. If your occupation is regulated or requires professional certification, you will need to will assess if you have chosen the correct occupation in Canada by reviewing your e documentation. The processing of your application will be paused until you obtain th".

[紧缺职业和快速入境职业要求](#)。如果您的职业受到管制或需要专业认证，您的雇主在聘用您之前可能需要上述清单中的文件。

您必须在回答以下所有剩余问题后才能继续。

The screenshot shows two questions with Yes/No buttons:

Have you completed post-secondary education, training or apprenticeship from a university, college, or trade school that resulted in a degree, diploma or certificate? (Y/N)*

Is your degree, diploma or certificate related to the occupation you have chosen above?*

点击  保存您的回复，以及

点击  检查您申请的申请类别下。