

EMPLOYEE INFORMATION FORM

HUMAN RESOURCES
ACADEMIC ANNEX, RM 112

New Hire Rehire/Extension Change

SECTION 1 – TO BE COMPLETED BY THE EMPLOYEE

Are you a FULL-TIME UofT student registered in a degree program? Yes No

If yes, what is your expected graduation date: _____

If you are currently a FULL-TIME UofT student registered in a degree program, and this status changes, please advise your manager.

Work/Study Permit: Yes * No **If you have a work or study permit, you must **attach a copy to this form.***

* If yes, please provide: Passport # _____ Passport Expiry Date (dd/mm/yy) _____

Personnel # (blank if new) _____ Student # _____ SIN _____

Form of Address Mr Ms _____ Other (Specify) _____ Birthdate (dd/mm/yy) _____

Last Name _____ First Name _____

Permanent/Official Tax Address
Suite/Unit # _____ City _____ Prov. _____ Postal Code _____

Sessional Address
Suite/Unit # _____ City _____ Prov. _____ Postal Code _____

Phone/Cell # _____ Email _____

IMPORTANT: For employees working in multiple departments, please provide the information below.

Department 2 _____ Supervisor #2 (Name) _____

Phone Number #2 _____ Description of Work #2 _____

Department 3 _____ Supervisor #3 (Name) _____

Phone Number #3 _____ Description of Work #3 _____

Please Note: You will be paid via Direct Deposit. Please attach a void cheque or pre-authorized deposit slip.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

Employee's Signature _____ Date Signed _____

SECTIONS 2 – 3 BELOW TO BE COMPLETED BY MANAGER/SUPERVISOR

2. Financial Information

Hourly Rate \$ _____ Anticipated Weekly Hours _____ Anticipated Monthly Hours _____

Fund Centre _____ Cost Centre _____ Fund _____ Order _____

3. Required Documents & Verification

TD – 1 TD – 1 ON Work/Study Permit as applicable Void Cheque/ Deposit Slip Letter of Offer

Manager's Name _____ Manager's Signature _____ Date _____