



Employee Information Form

Type of Action

New Hire Rehire Change

Effective Date

SECTION 1 - TO BE COMPLETED BY THE EMPLOYEE

Are you a full-time UofT student registered in a degree program? Yes No

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

If you have a work or study permit, please record the applicable information, and ensure your manager has seen the original.

Work/Study Permit # Permit Expiry Date

Personnel No (blank if new) Student No. SIN

Form of Address Mr Miss Mrs Ms Dr Birthdate (ddmmyy)

First Name Permanent/Official Tax Address

Last Name City Prov. Postal Code

E-mail Sessional Address

Phone Number City Prov. Postal Code

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

IMPORTANT: Direct Deposit/Banking Information - attach void cheque

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.

Employee's Signature Today's Date

SECTIONS 2 - 4 BELOW TO BE COMPLETED BY MANAGER/SUPERVISOR

2. Position Information

Department Position Title

Employee Group Description of Work

3. Financial Information

Hourly Rate Anticipated Weekly Hours Anticipated Monthly Hours

Fund Centre Cost Centre Fund Order

4. Required Documents & Verification

TD - 1 TD - 1 ON Work/Study Permit Confirmed
 Void Cheque First Timesheet Offer of Employment **TA's** - Allocation of Hours

Manager's Name Manager's Signature Today's Date