## New Employee Information Form

THIS FORM MUST BE COMPLETED AND SUBMITTED TO DEPARTMENT STAFF BEFORE THE EMPLOYEE COMMENCES WORK.

Graduate students must receive approval from their program supervisors before accepting employment.

** TO BE COMPLETED BY NEW EMPLOYEE **	
Employee Information	
Last Name First Name	Student Status
Person ID Number Date of Birth	Social Insurance Number Immigration Status
Country of Citizenship (if not Canada)	* A copy/scan of work or study permit is required for non-Canadians.
Street Address City	Province Postal Code
I am currently employed by the University of Alberta. (The Department	t may require additional information.)
** TO BE COM Employment Details	MPLETED BY EMPLOYER **
Start Date End Date	Hours (per week)  Max Hours
Description of Work	
Financial Details	
Project Name Speedcode	Combocode/Chartfield String
Rate of Pay Max Pay	

**PROTECTION OF PRIVACY:** The personal information requested on this form is collected under the authority of Section 33 (c) of the *Alberta Freedom of Information and Protection of Privacy Act* for the purpose of use on the Department website and other promotional materials. Questions regarding the collection, use, and disposal of this information can be directed to: Joanne McKinnon (780.492.0130, jmckinno@ualberta.ca).