

New Hire Enrollment Form



Employee Information

Legal Name: Sohard Sukhija
First Name Last Name
Address: 56 Field Thistle Drive Brampton L6R3A6
No. Street City Postal Code
Email: vasusukhija2003@gmail.com

Preferred Name: Vasu

SIN: 566375499

Primary Phone Number: 647-507-4894

Alternate Number: 289-323-3894

Optional Information:

If you prefer not to disclose the information below, please leave it blank.

Gender: Male

Pronouns: he/him

Emergency Contact Information

In case of an emergency, please provide us two people you'd like us to contact:

Name: Navneet Kumar

Name: Shallu Sukhija

Relationship: Father

Relationship: Mother

Home Phone: 647-507-4894

OR

Home Phone: 416-560-4191

Alternate Phone: _____

Alternate Phone: _____

Medical Information

Allergies: N/A

Conditions: N/A

Direct Deposit Enrollment

By providing an email address above (in the Employee Information section), you authorize the Town to email your e-pay slip and T4 to you. It is your responsibility to notify Payroll of any changes to your email address.

In accordance with the Employment Standards Act, the bank account(s) (below) must be in your name (Section 11, ESA 2000).

Primary Account:

Bank Number: 004

Transit Number: 20322

Account Number: 6068134

Optional Secondary Account (For PFT Only):

Bank Number: _____

Transit Number: _____

Account Number: _____

Bi-weekly Amount to be deposited in Secondary Account: \$ _____

Please attach your void cheque(s) or direct deposit form(s) from your bank.

Employee Authorization and Agreement:

By signing this document, I hereby authorize the above information is accurate and up to date.

| | |
|-----------|-------------------|
| Name | Sohard Sukhija |
| Signature | |
| Date | September 10 2023 |

In accordance with Section 29(2) of the Municipal Freedom of Information and Protection of Privacy Act, personal information in connection with this form is collected under the authority of the Town of Caledon. If you have any questions about the collection or personal information please contact the Town's FOI Co-Ordinator, 6311 Old Church Road, Caledon, ON L7C 1J6. Telephone 905-584-2272