

Personal Information

Transaction Type: Empl ID (if known):

Prefix: First Name: Middle Name(s): Last Name:

Address: Prov/State: Postal/Zip Code:

City: Country: Country of Birth:

Date of Birth:

Status in Canada:

Removal Allowance: Yes No

Personal Email:

Supporting Documentation: Yes No A B C D E F (see Form Help for list)

Appointment Information

Posting No: JOR No: Rank match Ad? Yes No

Effective Date: Expected End Date: (Required if not Tenured)

Dept ID/Name: Appt Type:

Rank: Limited Term Reason: according to Article 1.6 c)

Secondary Title: Position #:

Joint Appointment: Dept ID: Dept ID:

Dept ID: Dept ID:

Automatically terminate current appointment? Yes No

Salary Components: Comp. Rate (annual) Position # (if applicable) FTE: Research/Project Holder:

1	Start Date:	End Date:	Fund	Dept ID	Account	Internal	Project	Activity
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other Income (Paid directly by): Comp. Rate (annual) Effective Date Expected End Date

Other Funding (start-up funds, house-hunting trips, etc)

Yes No Relocation top-up (if known):

Start-up Funds (if known): Other:

Comments

Approvals

Direct Reporting Information: Head or Equivalent: Dean or Equivalent: Position #:

Recommended by Head (or equivalent) to Dean:

Name: Signature: Date:

Name: Signature: Date:

Name: Signature: Date:

Name: Signature: Date:

Recommended by Dean (or equivalent) to Provost & Vice-President (Academic)

Name: Signature: Date:

Name: Signature: Date:

Action of the Provost & Vice-President (Academic):

By signing this document, I hereby approve the details as described herein:

Name: Signature: Date:

Distribution Date: