

Dept of Biochemistry & Molecular Biology Dept of Cellular & Physiological Sciences 2350 Health Sciences Mall Vancouver, BC V6T 1Z3

INFORMATION REQUIRED FOR NEW EMPLOYEES

Employee Information:

○ Faculty ○ Staff	Student Select Car	tegory:	
Prefix:	Name:		
Position:			
Supervisor Name:		*Signature:	
*Start Date:		*End Date:	
IS THIS A KEY REQUISITION ONLY	? O YES O NO		*Must Be Completed
Access Required:			
Passcard: O YES O NO	<u></u>	Elevator: Upper Floors	s □ B2 □ B3
Key(s): ○ YES ○ NO	Office #(s):	Lab #(s):	
Student #:	Employe	ee ID:	
UBC Card iClass #:	Email: _		
APPOINTMENT REQUIRED?	○ YES ○ NO		
Home Address:		City:	
Postal Code:		Telephone:	
Email:		Birthdate:	
Employee ID (if known):			
Student #:		SIN:	
Salary Amount:	(YEARLY MONTHLY	○ HOURLY ○ PER PERIOD
Speedchart:	PG:	Fund:	Earn Code:
Are you currently or have you previou	usly been on UBC payroll?	○ YES ○ NO	
Student/Staff forms submit to	: CAPS: Naz Khan (naz	z.khan@ubc.ca)	
	BIOC: Lori Bennett (I	ori.bennett@ubc.ca)	
RA/Postdoctoral forms submit	to: Mark Mendoza (ma	ark.mendoza@ubc.ca)	
Safety Orientation Login:		Safety Orientation Password:	