

INFORMATION REQUIRED FOR NEW EMPLOYEES

Employee Information:

O Faculty O Staff O Student Select Ca	itegory:
Prefix:Name:	
Position:	
Supervisor Name:	_*Signature:
*Start Date:	_*End Date:
IS THIS A KEY REQUISITION ONLY? OYES ONO	*Must Be Completed
Access Required:	
Passcard: OYES ONO Main Door	Elevator: Upper Floors B2 B3
Key(s): OYES ONO Office #(s):	Lab #(s):
Student #:Employe	e ID:
UBC Card iClass #:Email:	
APPOINTMENT REQUIRED? OYES ONO	
Home Address:	City:
Postal Code:	Telephone:
Email:	Birthdate:
Employee ID (if known):	
	_SIN:
Salary Amount:	YEARLY O MONTHLY O HOURLY O PER PERIOD
Costing Allocation: Cost Centre	Worktag PM
Are you currently or have you previously been on UBC payroll? OYES ONO	
Student and Staff forms submit to: Marc Betsayda (marc.betsayda@ubc.ca) Print Form	
Research Assoc./Postdoctoral forms submit to: Mark Mendoza (mark.mendoza@ubc.ca)	
Key Requests to: Nazreen Khan (<u>naz.khan@ubc.ca</u>)	