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| **STUDENT INFORMATION (to be completed by student)** | | | |
| Last Name: | | Employee Number (if applicable): | |
| First/Middle Name: | | Student I.D. Number: | |
| Employment Program:  Proctor ❑ Research Assistant (Grant) ❑ Outstanding Scholar ❑  Work Study ❑ Co-op ❑ WISE ❑ HRSDC/Services Canada ❑ Casual (as needed) ❑ Other ❑ | | | |
| **EMPLOYMENT DETAILS (to be completed by department)** | |  | |
| Position/Job Title: | | | |
| Department:  Grant Owner: | | Grant #/Cost Centre #:  Grant Source:  Grant Expiry Date: | |
| Direct Manager/Supervisor: | | Start Date:  End Date: | |
| Rate of Pay per Hour (4% Vacation Entitlement will be added): | | Hours of Work (part time hours of work must not exceed a total of 24 hours per week) : | |
| **JOB DETAILS/DESCRIPTION (to be completed by department)** | | | |
| Type of Work Performed:  Clerical ❑ Administrative ❑ Technical ❑ IT-based ❑ Other ❑ | | | |
| Key Functions (identify key duties to be performed):  1. 6.  2. 7.  3. 8.  4. 9.  5. 10. | | | |
| **AUTHORIZATION INFORMATION – To Be Signed By Departmental Payroll Signing Authority Only** | | | |
| Student Casual Wage Time Sheet Authorized By(please print): | | | Date: |
| Signature: | | | |
| Hiring Authorized by (please print): | | | Date: |
| Signature: | | | |
| **VERIFICATION OF DOCUMENTS (HUMAN RESOURCES USE ONLY)** | | | |
| Eligibility to Work in Canada Yes ❑ No ❑ N/A ❑ | Study Permit Yes ❑ No ❑ N/A ❑ | | |
| Verifier’s Initials: | | | Date: |

**NOTE: Payment will NOT be made until this form is FULLY COMPLETED**