*Department Letterhead*

*Letter of invitation for Guest Lecturer to be issued prior to the date of event.*

Date

Personal and Confidential

Name
Address
Sent by email to :

Dear Name,

I would like to thank you for accepting our invitation to participate as a Guest Lecturer in the (Name of Course/Lecture/ Workshop/Seminar/) being held on (date) at (location).

*(Optional: additional information on lecture/workshop may be described here*)

In recognition of your contributions, we will provide you with a one-time payment of $xxx.

*(Optional sentence, remove if not appropriate):* We will also reimburse your associated travel expenses for this lecture up to a maximum of $xxx. All expenses must adhere to the (Faculty) and McGill University’s Expense Reimbursement and Financial Policies.)

I would like to ask that you become familiar with McGill University’s Policy Against Sexual Violence [policy\_against\_sexual\_violence.pdf (mcgill.ca)](https://www.mcgill.ca/secretariat/files/secretariat/policy_against_sexual_violence.pdf) as well as McGill University’s Policy on Harassment and Discrimination [policy\_on\_harassment\_and\_discrimination.pdf (mcgill.ca)](https://www.mcgill.ca/secretariat/files/secretariat/policy_on_harassment_and_discrimination.pdf).

It is the responsibility of all members of the (Faculty) to adhere to the FMHS Code of Conduct, which is available at <https://www.mcgill.ca/medhealthsci/about/our-vision-mission-values/code-conduct>.

(*Optional, if arriving from outside of Canada – contact* immigration.apo@mcgill.ca *if there are any questions*): Your speaking engagement at McGill University will last no longer than five days. It is our understanding that, following your visit, you will be returning to your position of ------- at the ---------.

As an invited Guest Lecturer at McGill University, you are exempt from a work permit under R186(j).

*(\*NOTE: in the event that an invited Guest Lecturer will be engaged for more than 5 days, contact* *immigration.apo@mcgill.ca* *).*

If you are in agreement with the terms and conditions of this offer, please sign below and return this letter to (name of McGill staff member at xxxxx@mcgill.ca).

If this is the first time you are being paid by McGill University, please provide ~~your address~~ personal and banking information by filling in the attached *Biographical Information For New Employee* form and a blank, voided cheque and return it to (name of McGill staff member at xxxxxx@mcgill.ca). If your address and or banking information has changed since the last time you were paid, please provide the updated information to (name of McGill staff member at xxxxxxx@mcgill.ca).

Sincerely,

Name and Title of Signing Authority

SIGN AND RETURN:

I accept this offer as outlined above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 *(signature) (date)*