



## Biographical Information for a New Employee

Required to complete the appointment process

*(Please print and forward the completed form to your department – contact information appears in the offer letter. This information is used for employment purposes only and is kept confidential.)*

Last Name	<input type="text"/>	First Name(s)	<input type="text"/>
Prefix(eg. Mrs. Mr. Dr.)	<input type="text"/>	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth	<input type="text"/> yyyy-mm-dd	Canadian Social Insurance Number	<input type="text"/> <input type="text"/> <input type="text"/>

Country of Citizenship	<input type="text"/>
------------------------	----------------------

### Status in Canada, if not Canadian Citizen: (choose one)

<input type="checkbox"/> Employment Authorization	<input type="checkbox"/> Permanent Resident		
Employment Authorization Number	<input type="text"/>		
Start Date	<input type="text"/> yyyy-mm-dd	Expiry Date	<input type="text"/> yyyy-mm-dd
Work and Reside Outside Canada			
<input type="checkbox"/> Yes <input type="checkbox"/> No			

### Home Address & Email

Address	<input type="text"/>
City	<input type="text"/>
Province/State	<input type="text"/>
Country	<input type="text"/>
Postal/Zip Code	<input type="text"/>
Telephone (Home)	<input type="text"/>
Personal Email Address	<input type="text"/>

Employee's Signature	<input type="text"/>	Date	<input type="text"/>
----------------------	----------------------	------	----------------------