

EMPLOYMENT CONTRACT FORM

For New Contracts or Renewed Appointments

PERSONAL INFORMATION

EMPLOYEE NAME _____ TELEPHONE # _____
 MAILING ADDRESS _____ SOCIAL INSURANCE # _____ / /
 CITY _____ BIRTH DATE _____
 PROVINCE _____ POSTAL CODE _____ COMPETITION # _____

POSITION INFORMATION

POSITION TITLE _____
 DEPT./DIVISION _____ CAMPUS/LOCATION _____

CONTRACT INFORMATION

Regular

BCGEU SCFA PPWC EXEMPT

start date: / / end of probation period: / /
 m d y m d y

Non-regular

BCGEU Non-regular start / / end / / # PD/CD days included _____
 m d y m d y

SCFA Short-term start / / end / /
 m d y m d y
 Annual start / / end / / Yr 1 Yr 2 For pay only
 m d y m d y

PPWC On-call start / / end / /
 m d y m d y
 Seasonal normal work term from / / to / /
 m d y m d y

Temporary start / / end / /
 m d y m d y

EXEMPT Short-term start / / end / /
 m d y m d y

Work load BCGEU SCFA EXEMPT Full-time OR Part-time: contract % _____
 PPWC Per time-sheet OR Full-time: 37.5 hrs or 36 hrs OR Part-time: contract % _____

Pay Scale Placement Step _____ Rate _____ Per hour Per pay period
 Stipend Type _____ Reason _____

BUDGET INFORMATION

Account Code																				%
Account Code																				%
Account Code																				%
Account Code																				%

FOR HR USE

BENEFITS Eligible Not Eligible VACATION Accrual or _____% EMPLOYEE # _____ CONT. LETTER

NOTES

DOCUMENTATION FOR NEW EMPLOYEES

TD1 (Fed) Form Attached
 TD1BC (Prov) Form Attached
 Void cheque attached

AUTHORIZATION

School Chair	Date (m / d / y)	Director, Budget	Date (m / d / y)
Deac/Manager	Date (m / d / y)	Human Resources	Date (m / d / y)