

INFORMATION REQUIRED FOR NEW EMPLOYEES

Employee Information:

○ Faculty ○ Staff ○ Student Select Ca	itegory:
Prefix: Name:	
Position:	
Supervisor Name:	_ *Signature:
*Start Date:	*End Date:
IS THIS A KEY REQUISITION ONLY? O YES O NO	*Must Be Completed
Access Required:	
	Elevator: Upper Floors B2 B3
Key(s): YES NO Office #(s):	Lab #(s):
Student #: Employ	ee ID:
UBC ID Card #: Email:	
APPOINTMENT REQUIRED? YES O NO	
Home Address:	City:
Postal Code:	Telephone:
Email:	Birthdate:
Employee ID (if known):	
Student #:	_ SIN:
Salary Amount: (YEARLY O MONTHLY O HOURLY O PER PERIOD
Speedchart: PG:	Fund: Earn Code:
Are you currently or have you previously been on UBC payroll? O YES O NO	
URA/UAA/WL/NSERC Student forms submit to: Nuray Makhsatova (nuray.makhsatova@ubc.ca)	
GRA/GAA/Staff forms submit to: Marc Betsayda (marc.betsayda@ubc.ca)	
RA/Postdoctoral forms submit to: Ayaka Bosshard (ayaka.bosshard@ubc.ca)	