

**NON-TEACHING PERSONNEL**

**Requisition and Hiring Form**

Department or Service: \_\_\_\_\_

Classification: \_\_\_\_\_ Position Number: \_\_\_\_\_

Status: Regular (previous incumbent): \_\_\_\_\_

Replacement – Name of person to be replaced: \_\_\_\_\_

Special Project

Occasional (additional workload or unforeseen event) Primary Task(s): \_\_\_\_\_

Number of days needed: \_\_\_\_\_ days

Workload: Full-time Part-time

Working hours: From: \_\_\_\_\_ To: \_\_\_\_\_ No. hours/week: \_\_\_\_\_

Does the Evening Shift Premium apply? (support staff only) Yes No

Duration of engagement: From: \_\_\_\_\_ To: \_\_\_\_\_  
yyyy mm dd yyyy mm dd

Budget Code: \_\_\_\_\_ Approved by: \_\_\_\_\_  
Director General signature

Approved by: \_\_\_\_\_  
Authorized signature Date

Approved by: \_\_\_\_\_  
Human Resources Department Date

**SALARY MUST BE DEPOSITED INTO EMPLOYEE'S BANK ACCOUNT**

Banking information is already on file and is valid, **IF NOT**

For chequing account, a void cheque is required OR For savings account, a direct deposit application form must be completed

Name of person hired: \_\_\_\_\_ Male Female  
Last Name First Name

Starting date: \_\_\_\_\_  
yyyy mm dd Authorized signature Date

Contact information is already on file and is valid

Address: \_\_\_\_\_  
No. Street

City Postal Code

Telephone number: ( ) \_\_\_\_\_

S.I.N.: \_\_\_\_\_

Date of birth: \_\_\_\_\_  
yyyy mm dd

<b>For Human Resources Department Only</b>	
Employee #:	_____
Classification:	_____
Step:	_____ Rate: _____
<input type="checkbox"/> Documentation Pending	
Service:	_____ S Service: _____
Approval:	_____ Date: _____