



Hiring Notification Form

Type of Action: New Hire Re-Hire Extension

Competition Number (if applicable): _____

Date: _____

Employee's

Name:

Last

First

Mr. Mrs. Miss Ms.

Check appropriate title

Home Address:

Home Phone #: _____

Date of Birth: _____ (DD/MM/YYYY)

Position #:

Personnel # (if previously
worked at Victoria): _____

Position title:

Classification/Payband: _____

Employment Status: Full Time Casual Term/Contract Regular Part-Time

Employee Group: P/M USW Librarian Faculty CUPE 3902 UTFA
 Confidentials IATSE Student

Person Replacing
(if applicable):

Term of Casual/Temporary
Employment: _____

Starting Salary/Hourly Rate: \$ _____

Start Date: _____

Hours/day or week: _____

Department: _____

Probationary/Trial Period: _____

Description of Duties (Casual only):

Additional Comments:

Access to E-mail Required?: Yes No

Supervisor: _____

Telephone #: _____

Approval to Hire

Department Charge Account No.: _____

Department Manager/Director (PRINT
NAME)

Title

Department/Section

Department Manager/Director's Signature

Date