

Postdoctoral Scholar Personal Information Form

POSTDOCTORAL APPOINTMENT INFORMATION

| | |
|---------------------------|--------------------------|
| Supervisor First Name: | Supervisor Last Name: |
| Supervisor Email: | Faculty: |
| Start Date: (mm/dd/yy) | End Date: (mm/dd/yy) |

POSTDOCTORAL SCHOLAR INFORMATION

| | | |
|---------------------|---|---------------------------------|
| First Name: | Middle Name: | |
| Last Name: | Full legal name must be entered as it appears on your passport | |
| UCID: (if known) | Gender: | |
| Citizenship: | Canadian | Permanent Resident of Canada |
| | | Other, please specify |

PLEASE COMPLETE IF YOU ARE NOT A CANADIAN CITIZEN OR PERMANENT RESIDENT OF CANADA

| | |
|--------------------------|------------------------------------|
| Country of Residence: | Status in Country of Residence: |
|--------------------------|------------------------------------|

For international postdoctoral scholars, a copy of the biographical page of your passport and current work permit, if applicable, must be included with this form in order for the University of Calgary to process the employer compliance fee for your work permit application.

CONTACT INFORMATION

| | | | |
|--------------------------|---------------------|----------------------|----------|
| Current Home Address: | | | |
| City: | Province/ State: | Postal/ Zip Code: | Country: |
| Phone Number: | | Email Address: | |

Degree Completion Date
(mm/dd/yyyy):

Required Documents:

Curriculum Vitae

Doctoral Degree Completion Verification – this must be either transcripts showing degree has been conferred or a letter from your home institution stating that all degree requirements have been completed

Social Insurance Number You will be receiving a system-generated email from DoNotReply@ucalgary.ca that will include a secure link to provide your Social Insurance Number (SIN). It is advisable to monitor your Junk email folder, and if possible add DoNotReply@ucalgary.ca to your safe list.

International Postdocs:

Scanned copy of the biographical page of your passport
 Scanned copy of your current work permit, if applicable
 Re. Social Insurance Number- see above

Submit completed form to postdoc@ucalgary.ca. All required documents and forms must be submitted.

This information is collected under the authority of the Freedom of Information and Protection of Privacy Act. It is required to process the hire and to facilitate the administration of payroll and benefits. If you have questions about the collection or use of this information, please contact 403.220.5932.