

Request for Postdoctoral Fellowship Holder Offer Letter

SUPERVISOR INFORMATION

Supervisor First Name _____ Supervisor Last Name _____

Supervisor Email _____ Supervisor Job Title _____

Faculty / Unit _____ Department _____ Institute (if applicable) _____

*Administrative Assistant / Onboarding Coordinator Name _____ Administrative Assistant / Onboarding Coordinator Email _____

* If no administrative assistant contact information is available, provide contact information for an Onboarding Coordinator

POSTDOCTORAL SCHOLAR INFORMATION

Postdoctoral Scholar First Name _____ Postdoctoral Scholar Last Name _____

Appointment Start Date (mm/dd/yyyy) _____ **Appointment End Date (mm/dd/yyyy) _____ Funding Agency _____

** Project end dates on PAGE 2 must be after the Appointment End Date

RESEARCH ACTIVITIES AND REQUIREMENTS

Please provide a short description of research activities which the PDS will be involved with as well as any other responsibilities:

| | | | | | |
|--|-----|----|---|-----|----|
| Will the PDS have contact with patients or research participants? If yes, please give details: | Yes | No | Will the PDS work from outside of Alberta? If yes, please give details: | Yes | No |
|--|-----|----|---|-----|----|

TRAVEL - Registration is required for all Postdocs travelling on University Business for Risk Management purposes:

Will the PDS be required to travel to national or international locations for conferences or fieldwork? _____ Yes _____ No _____
 If yes, please specify the location, purpose of travel, and dates (if known): _____

INTERNATIONAL POSTDOCS - for the Citizenship and Immigration Canada Offer of Employment form, completed by HR Immigration:

Will the PDS work at locations outside the UofC Main Campus or Foothills Campus? _____ Yes _____ No _____
 If yes, please specify address and location: _____

Please list the experience and skills required for this position:

Annual Stipend:

Minimum Salary/Stipend: The minimum salary/stipend required at the University of Calgary is \$40,000 per year. Please enter the appropriate Research Project Accounting Information "Fund" Code(s) if a supplementary top-up will be provided.

There must be sufficient funds in all sources to cover the full duration of the appointment

FUNDING SOURCE 1

Fund: Dept ID:
Project: Activity Code:
Percentage Charged:
From (mm/dd/yyyy):
To (mm/dd/yyyy):

FUNDING SOURCE 2

Fund: Dept ID:
Project: Activity Code:
Percentage Charged:
From (mm/dd/yyyy):
To (mm/dd/yyyy):

****IMPORTANT****

- ✓ The request for offer letter may be rejected if funding sources are not available to cover the entire duration of the appointment.
- ✓ The length of the appointment may be adjusted to accommodate the availability of funding.

FUNDING SOURCE 3

Fund: Dept ID:
Project: Activity Code:
Percentage Charged:
From (mm/dd/yyyy):
To (mm/dd/yyyy):

Additional Funding

Include as applicable any other funding available, such as for conferences, relocation costs, and other research-related expenses.

Postdoctoral Fellowship Holders are NOT eligible for Plan C Extended Health Benefits. Insurance can be purchased through a private insurance company at the expense of the postdoc.

EMPLOYER COMPLIANCE FEE FOR INTERNATIONAL POSTDOCTORAL SCHOLARS – MANDATORY FEE: \$230

Employers hiring foreign nationals who are exempt for the LMIA process (this includes postdoctoral scholars) will be required to submit information about their business or organization, complete the Offer of Employment form, and pay a compliance fee of \$230 per work permit to Citizenship and Immigration Canada. This fee must be paid by the supervisor or department. For more information, visit our [HR Immigration Guidelines for Postdoctoral Scholars](#).

In order for HR Immigration Services to complete the Offer of Employment Form and pay the Compliance Fee, please complete the Employer Compliance Fee Payment Form on our [Resources Webpage](#) and submit to postdoc@ucalgary.ca along with the Request for Offer Letter Form.

This information is collected under the authority of the Freedom of Information and Protection of Privacy Act. It is required to process new hires and facilitate the administration of payroll and benefits information. If you have questions about the collection or use of this information, please contact UService at 403.210.9300.