USW Casual Employment Details

NAME OF EMPLOYEE:	NAME OF SUPERVISOR:
EMPLOYEE ADDRESS (FOR PAYROLL AND TAX RECEIPTS) APARTMENT/STREET: CITY: PROVINCE: POSTAL CODE:	
EMPLOYEE EMAIL ADDRESS:	
IS EMPLOYEE CURRENTLY A REGISTERED FULL-TIME STUDENT? YES NO IF YES, PLEASE PROVIDE STUDENT NUMBER:	HAS EXMPLOYEE PREVIOUSLY WORKED AT UOFT? YES NO IF YES, PLEASE PROVIDE U OF T PERSONNEL NUMBER:
EMPLOYMENT START DATE:	EMPLOYMENT END DATE:
DOES THE DEPARTMENT HAVE FUNDING FOR THIS CASUAL POSITION? YES NO WHY IS THIS CASUAL POSITION REQUIRED?	
TERMS OF PREVIOUS CONTRACTS:	
MAX. HOURS OF WORK PER WEEK:	HOURLY RATE MINIMUM RATE (\$15.00) DUTIES TO BE ASSESSED BY HR
SCHEDULE: You will be provided with a schedule of hours on a weekly basis You will be contacted by email/telephone when you are needed to work Other. Please describe below. (E.g. Monday, Wednesday, Friday 8:45am to 5:00pm)	
DESCRIPTION OF DUTIES: • • • • • • • • • •	
For example: Performs basic office support like stuffing envelopes, organizing files, purging documents, and general office clean up. This is over load work that is under close direction of other staff.	
SUPERVISOR'S SIGNATURE:	
DATE:	