

NEW HIRE FORM



Employee Details:

Full Name (First and last):
Address:
City/Town:
Postal Code:
Phone Number:
Date of Birth:
SIN Number: <i>(required)</i>
Job Title:
Start Date:
Health Card # (OHIP):
Email Address:
<i>*Pay statements, ROE's, T4's and work-related emails will be sent to the email address provided</i>

Banking Info for Direct Deposit: ****Must provide a void cheque or bank authorization form.***

Account #:
Transit #:
Institution #:

Emergency Contact Information:

Emergency Contact Name:
Relationship:
Phone Number:

****If planning to drive our company vehicles, please also include a copy of your drivers' license.***

For Office Use Only:

Employee ID:
Department:
Home Job:
Pay rate:
Hire Date:
MyMITC access needed: <i>(Yes or No)</i>
Permanent Schedule to MITC: <i>(Yes or No & details)</i>