 Hire a Known Candidate – Post Doctoral Fellow

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| **Manager Information** | | |
| **PI Name** |  | **Phone Ext:** |
| **PI Title** |  |  |
| **Program Manager**  (If applicable) |  | **Phone Ext:** |

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| **Candidate Information** | |
| **Name of Candidate:** |  |

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| **Assignment/Payroll Information** | |
| **Position:** | Post Doctoral Fellow |
| **Department name:** |  |
| **Start Date:**  (Important – Refer to [**HR Notification Deadlines**](https://unitynet.unity.local/departments-programs-services/research/research-employment/).  Must be a Monday, unless a statutory holiday, in which case it must be Tuesday) | **Click here to enter a date.** |
| **End Date:** (Post Doc hires must be temporary) | **Click here to enter a date.** |
| **Pay Rate:** (hourly, refer to [**Job Descriptions and Salaries**](https://unitynet.unity.local/departments-programs-services/research/research-employment/)) | $ |
| **Work Type:** | **Choose Work Type from List** |
| **If Part-Time, identify how many days per week** (Post Doc hires are full time unless otherwise approved) | **Select Number of Days per week from List** |
| **Reason for Hire:** | **Choose Reason from List** |
| **Previous Incumbent (if applicable):** |  |
| **Payroll Information:** (Please refer to the attached spreadsheet [**Research Org Units**](https://unitynet.unity.local/departments-programs-services/research/research-employment/)) | **GHR Organization Unit Name:**  **Organization Unit Number:** |
| **Payroll Time Entry Person**: | |
| **\*NOTE:** **You must inform your time entry person that they will have a new person starting on payroll. If you don’t know your time entry person, please contact the Research Employment Coordinator.** | |

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| **Additional Information for the letter** | |
| **Position:** | Post Doctoral Fellow |
| **Address of PDF:** |  |
| **Phone # of PDF:** |  |
| **Email of PDF:** |  |
| **Does the PDF have a PhD or MD?** |  |
| **Where did the PDF complete their PhD or MD?** |  |
| **When was the PhD or MD obtained?** |  |
| **Will the PDF have any patient contact?** |  |
| **Is the PDF international?** | **Choose an item.** |
| **Do they have a work permit, if yes please include a copy** | **Choose an item.** |
| **Area of Research Focus - Complete the following sentence "During the Fellowship, the PDF will be taught and trained on...:** |  |
| **PDF Detailed Learning Objectives (meant to benefit the PDF not the Supervisor, should be detailed):** |  |

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| **Accounting Unit & Project Number(s):** | | | | |
| **Do all the activities listed below belong to you?**  **Choose answer** | | | | |
| **If no, indicate who they belong to:** | | | | |
|  | **Company** | **Accounting Unit** | **Project Number** | **Percentage (%)** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **\*NOTE: All PI’s who own any of the abovementioned cost centre(s) must be copied in the request for RFA approval.\*** | | | | |

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| **Conflict of Interest Disclosure for Hiring this Candidate:** | |
| Is the candidate a family member of the supervisor (or the individual responsible for the decision to engage this incumbent)? | **Choose answer** |
| Is the candidate affiliated with an organization in which the supervisor or the supervisor’s family member has a financial or ownership interest? | **Choose answer** |
| (Family Member includes a spouse, domestic partner, child, parent, sibling, grandparent, grandchild or other close relation. For the purpose of this policy (i.e., Research Conflicts of Interest), a family relationship includes biological relationships, adoptive relationships, relationships created through marriage and other relationships in which care-giving or dependency exists.  Please note that if you check “Yes”, before this hire can be processed this information will be forwarded to the Office of Research Administration for review under the Research Conflicts of Interest Policy) | |

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| **Additional Questions** | |
| **Is the candidate on a work permit or study permit? If yes, please submit a copy with this hiring package.** | **Choose an item.** |
| **Will the candidate be residing outside of Ontario during their employment at UHT?** | **Choose an item.** |

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| **Criminal Check** | |
| Have you advised the candidate that a Criminal Check will be required before their start date?   Consent will be obtained through email from HR in advance of issuing the contract letter) | **Choose answer** |
| Unity Health Toronto conducts Criminal Record Checks for all external candidates. We ask that you advise the candidate that a Criminal Check will be required before their start date***.*** Candidates may not begin working at UHT prior to submitting a Criminal Check which they will complete via email in advance of their first day at work.  For purposes of the Criminal Record Check, we need the following information from the Candidate: | |
| Candidate legal first name |  |
| Candidate legal last name |  |

**\*NOTE: Please save the completed template as a Microsoft Word document, NOT as a PDF\***