

## Work Terms Abroad

## SELF-DEVELOPED JOBS INFORMATION SHEET

## 1. Student Information

Surname		Other N	Other Names in Full			
Student Number		Stream				
Telephone	Email A	Email Address				
Credits completed to date	□ 10½ -	15 _ 1	5½ - 20	Work terms	completed 2	
2. Employer Information						
Company Name				Is this a	a paid position? Yes	
Company Address						
Postal Code	City			Country		
Supervisor Name			Super	visor Position		
Telephone		Email				
Address (If different from above)		<u> </u>				
Language Spoken (If not Eng	ve you inforr	you informed the employer of their responsibilities?  Yes No*				
* If selected no, please visit http://www.utsc.utoronto.ca/~mgmtcoop/employer/responsibility.htm						
3. Job Information	n					
Position Title			Salary		Hours per Week	
Start Date (DD/MM/YYYY)	ite (DD/MM/YYYY) End Date			Are you a citizen of the host country?  Yes No		
Job Description			·			
Who is paying for airfare?  Student Employer Undecided Student Employer Undecided						

How did you find this position?	
What do you want to learn from this job experies	nce?
Responsibility Checklist	income tay requirements regarding work
outside Canada.	income tax requirements regarding work
	accept liability regarding any expenses,
costs or loses that I may incur wh For my personal security, I ackno	
respect the laws and the custo	oms of the foreign country
complete a pre-departure physical	sical and any required immunizations
foreign country	s in opposition to the government of the
	the Canadian Government or UofT s to ensure my personal welfare
(development of a Risk Manag	gement Plan is recommended.)
<ul><li>register at a Canadian Govern http://voyage.gc.ca/main/sos/r</li></ul>	
<ul><li>Monitor FAC Travel Reports for</li></ul>	or your particular region
http://www.fac- aec.gc.ca/mer	u-en.asp
	d to abide by the policies, procedures and
practices of my employer where I responsible for all expenses (ac	am working; and that I am solely commodation, phone/fax/email) relating to
my employment abroad.	
employment abroad, including the r	ted person regarding all aspects of my nature of possible risks.
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Student Signature	Date
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Coordinator Signature	 Date
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