



WORK STUDY SET-UP/CHANGE OF INFORMATION

This form should be submitted to Human Resource Services in accordance with the **Biweekly/Monthly Payroll Schedule**.

Mr. Ms. Mrs. Miss Misc Mx

Last Name (Name on SIN Document)		First & Middle Name (Name on SIN Document)		Known As (Optional)		
SIN		Student No.		Personnel No. (Blank for new employees)		
Street No. and Name		New <input type="checkbox"/>	Apt No.	City/Town	Province	Postal Code
Telephone	New <input type="checkbox"/>	Email Address		Date of Birth (D/M/Y)		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X

SET-UP CHECKLIST:

- Printed **Work Study Hiring Approval Form** Email Attached
- Work Study Letter of Offer Attached
- Verification of SIN for New Hire Verified by _____
 Returning Employee
- Copy of Student/Work permit (If SIN starts with a "9") Attached On File N/A
- Current TD1/TD1ON Form Attached On File
- Banking Authorization Attached On File
- Safety Training Acknowledgement Form Attached

SET-UP INFORMATION:

First Day Worked: _____ (no earlier than May 6, 2024)

End Day: August 16, 2024

Type of Work: Work Study

Hourly Rate: \$16.55/hr

FIS Number: CC: _____ CFC: _____ Fund: _____ Order: _____

- Please note that the FIS number is required to set up the work study student in HRIS**

Employer's Name (Please Print)	Phone #
Employer's Signature	Date
	Department

- Please note that incomplete forms/incorrect information will not be processed. Please submit the first timesheet together with the work study setup forms.
- For enquiries or questions please contact Human Resource Services at workstudy.utsc@utoronto.ca



PAYROLL BANK DEPOSIT AUTHORIZATION FORM FOR DIRECT DEPOSIT

INSTRUCTIONS FOR COMPLETION:

- To ensure that your account is correct, please attach a cheque marked "VOID" for an account with chequing privileges or a personalized deposit slip. (Your financial institution may not accept Direct Deposit for accounts other than savings or chequing, i.e. line of credit. Please check with your financial institution.)
- Be sure to complete ALL sections and sign the form in Section "D".**
- Return the completed form to B526C/D, Human Resource Services, for processing. Please check with your department regarding payroll deadlines.

Section A – Personal Information

Last Name:	First Name:
Personnel Number:	Social Insurance Number:
Address (Street No. & Name, Apt. No., City, Province, Postal Code):	
Home Telephone No.:	University Telephone No.:

Section B – Requested Action

Check one only:			YYYY-MM-DD
()	New Direct Deposit (first time set-up)	Effective Date	
	Change Direct Deposit	Effective Date	
()	Please do not close the account to which the Payroll Department is currently depositing your pay until you have had one successful deposit to your new account.		

Section C – Institution Information

Your account number must be recorded accurately. An account number with missing or incorrect information will be rejected. For this reason, be sure to include every "0" and "-" when recording your account number.	
Name of Bank or Financial Institution:	
Institution Number (3 digits):	Bank Transit Number (5 digits):
Account Number (7-12 digits):	Main Intersection of Bank:
Bank Address: (Street No. & Name, City, Province, Postal Code; Canadian Branches Only)	
Postal Code:	Bank Telephone No.:

Section D – Authorization and Signature

I hereby authorize the University of Toronto to deposit my payroll payment in the bank or financial institution designated and I hereby authorize the bank or financial institution designated to release my bank account number to the University of Toronto Payroll Department.	
Signature:	Date(yyyy-mm-dd):
	Department:



2024 Personal Tax Credits Return

TD1

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions.

Fill out this form based on the best estimate of your circumstances.

If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

Last name		First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number
Address		Postal code	For non-residents only Country of permanent residence	Social insurance number

1. Basic personal amount – Every resident of Canada can enter a basic personal amount of \$15,705. However, if your net income from all sources will be greater than \$173,205 and you enter \$15,705, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than \$173,205 you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the 2024 Personal Tax Credits Return, and enter the calculated amount here.

15,705

2. Canada caregiver amount for infirm children under age 18 – Only one parent may claim \$2,616 for each infirm child born in 2007 or later who lives with both parents throughout the year. If the child does not live with both parents throughout the year, the parent who has the right to claim the "Amount for an eligible dependant" on line 8 may also claim the Canada caregiver amount for the child.

3. Age amount – If you will be 65 or older on December 31, 2024, and your net income for the year from all sources will be \$44,325 or less, enter \$8,790. You may enter a partial amount if your net income for the year will be between \$44,325 and \$102,925. To calculate a partial amount, fill out the line 3 section of Form TD1-WS.

4. Pension income amount – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, old age security, or guaranteed income supplement payments), enter whichever is less: \$2,000 or your estimated annual pension income.

5. Tuition (full-time and part-time) – Fill in this section if you are a student at a university or college, or an educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees. Enter the total tuition fees that you will pay if you are a full-time or part-time student.

6. Disability amount – If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$9,872.

7. Spouse or common-law partner amount – Enter the difference between the amount on line 1 (line 1 plus \$2,616 if your spouse or common-law partner is infirm) and your spouse's or common-law partner's estimated net income for the year if two of the following conditions apply:

- You are supporting your spouse or common-law partner who lives with you
- Your spouse or common-law partner's net income for the year will be less than the amount on line 1 (line 1 plus \$2,616 if your spouse or common-law partner is infirm)

In all cases, go to line 9 if your spouse or common-law partner is infirm and has a net income for the year of \$28,041 or less.

8. Amount for an eligible dependant – Enter the difference between the amount on line 1 (line 1 plus \$2,616 if your eligible dependant is infirm) and your eligible dependant's estimated net income for the year if all of the following conditions apply:

- You do not have a spouse or common-law partner, or you have a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- You are supporting the dependant who is related to you and lives with you
- The dependant's net income for the year will be less than the amount on line 1 (line 1 plus \$2,616 if your dependant is infirm and you cannot claim the Canada caregiver amount for infirm children under 18 years of age for this dependant)

In all cases, go to line 9 if your dependant is 18 years or older, infirm, and has a net income for the year of \$28,041 or less.

9. Canada caregiver amount for eligible dependant or spouse or common-law partner – Fill out this section if, at any time in the year, you support an infirm eligible dependant (aged 18 or older) or an infirm spouse or common-law partner whose net income for the year will be \$28,041 or less. To calculate the amount you may enter here, fill out the line 9 section of Form TD1-WS.

10. Canada caregiver amount for dependant(s) age 18 or older – If, at any time in the year, you support an infirm dependant age 18 or older (other than the spouse or common-law partner or eligible dependant you claimed an amount for on line 9 or could have claimed an amount for if their net income were under \$15,705) whose net income for the year will be \$19,666 or less, enter \$8,375. You may enter a partial amount if their net income for the year will be between \$19,666 and \$28,041. To calculate a partial amount, fill out the line 10 section of Form TD1-WS. This worksheet may also be used to calculate your part of the amount if you are sharing it with another caregiver who supports the same dependant. You may claim this amount for more than one infirm dependant age 18 or older.

11. Amounts transferred from your spouse or common-law partner – If your spouse or common-law partner will not use all of their age amount, pension income amount, tuition amount, or disability amount on their income tax and benefit return, enter the unused amount.

12. Amounts transferred from a dependant – If your dependant will not use all of their disability amount on their income tax and benefit return, enter the unused amount. If your or your spouse's or common-law partner's dependent child or grandchild will not use all of their tuition amount on their income tax and benefit return, enter the unused amount.

13. TOTAL CLAIM AMOUNT – Add lines 1 to 12.
Your employer or payer will use this amount to determine the amount of your tax deductions.

Filling out Form TD1

Fill out this form **only** if any of the following apply:

- you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration
- you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed)
- you want to claim the deduction for living in a prescribed zone
- you want to increase the amount of tax deducted at source

Sign and date it, and give it to your employer or payer.

More than one employer or payer at the same time

If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1 for 2024, you **cannot** claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1, check this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.

Total income is less than the total claim amount

Tick this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on line 13. Your employer or payer will not deduct tax from your earnings.

For non-resident only (Tick the box that applies to you.)

As a non-resident, will 90% or more of your world income be included in determining your taxable income earned in Canada in 2024?

Yes (Fill out the previous page.)

No (Enter "0" on line 13, and do not fill in lines 2 to 12 as you are not entitled to the personal tax credits.)

Call the international tax and non-resident enquiries line at **1-800-959-8281** if you are unsure of your residency status.

Provincial or territorial personal tax credits return

You also have to fill out a provincial or territorial TD1 form if your claim amount on line 13 is more than \$15,000. Use the Form TD1 for your province or territory of **employment** if you are an employee. Use the Form TD1 for your province or territory of **residence** if you are a pensioner. Your employer or payer will use both this federal form and your most recent provincial or territorial Form TD1 to determine the amount of your tax deductions.

Your employer or payer will deduct provincial or territorial taxes after allowing the provincial or territorial basic personal amount if you are claiming the basic personal amount **only**.

Note: You may be able to claim the child amount on Form TD1SK, 2024 Saskatchewan Personal Tax Credits Return if you are a Saskatchewan resident supporting children under 18 at any time during 2024. Therefore, you may want to fill out Form TD1SK even if you are **only** claiming the basic personal amount on this form.

Deduction for living in a prescribed zone

You may claim **any** of the following amounts if you live in the Northwest Territories, Nunavut, Yukon, or another prescribed **northern** zone for more than six months in a row beginning or ending in 2024:

- \$11.00 for each day that you live in the prescribed northern zone
- \$22.00 for each day that you live in the prescribed northern zone if, during that time, you live in a dwelling that you maintain, and you are the only person living in that dwelling who is claiming this deduction

Employees living in a prescribed **intermediate** zone may claim 50% of the total of the above amounts.

For more information, go to canada.ca/taxes-northern-residents.

\$

Additional tax to be deducted

You may want to have more tax deducted from each payment if you receive other income such as non-employment income from CPP or QPP benefits, or old age security pension. You may have less tax to pay when you file your income tax and benefit return by doing this. Enter the additional tax amount you want deducted from each payment to choose this option. You may fill out a new Form TD1 to change this deduction later.

\$

Reduction in tax deductions

You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

Forms and publications

To get our forms and publications, go to canada.ca/cra-forms-publications or call **1-800-959-5525**.

Personal information (including the SIN) is collected and used to administer or enforce the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be disclosed to other federal, provincial, territorial, aboriginal or foreign government institutions to the extent authorized by law. Failure to provide this information may result in paying interest or penalties, or in other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Information about Programs and Information Holdings at canada.ca/cra-information-about-programs.

Certification

I certify that the information given on this form is correct and complete.

Signature _____

Date _____

It is a serious offence to make a false return.

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your provincial tax deductions.

Fill out this form based on the best estimate of your circumstances.

Last name	First name and initial(s)	Date of birth (YYYY/MM/DD)	Employee number
Address	Postal code	For non-residents only Country of permanent residence	Social insurance number

1. Basic personal amount – Every person employed in Ontario and every pensioner residing in Ontario can claim this amount. If you will have more than one employer or payer at the same time in 2024, see "More than one employer or payer at the same time" on page 2. **12,399**

2. Age amount – If you will be 65 or older on December 31, 2024, and your net income will be \$45,068 or less, enter \$6,054. You may enter a partial amount if your net income for the year will be between \$45,068 and \$85,428. To calculate a partial amount, fill out the line 2 section of Form TD1ON-WS, Worksheet for the 2024 Ontario Personal Tax Credits Return.

3. Pension income amount – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, Old Age Security, or Guaranteed Income Supplement payments), enter **whichever is less**: \$1,714 or your estimated annual pension.

4. Disability amount – If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$10,017.

5. Spouse or common-law partner amount – Enter \$10,528 if you are supporting your spouse or common-law partner and **both** of the following conditions apply:

- Your spouse or common-law partner lives with you
- Your spouse or common-law partner's net income for the year will be \$1,053 or less

You may enter a partial amount if your spouse's or common-law partner's net income for the year will be between \$1,053 and \$11,581. To calculate a partial amount, fill out the line 5 section of Form TD1ON-WS.

6. Amount for an eligible dependant – Enter \$10,528 if you are supporting an eligible dependant and **all** of the following conditions apply:

- You do **not** have a spouse or common-law partner, or you **have** a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- The dependant is related to you and lives with you
- The dependant's net income for the year will be \$1,053 or less

You may enter a partial amount if the eligible dependant's net income for the year will be between \$1,053 and \$11,581. To calculate a partial amount, fill out the line 6 section of Form TD1ON-WS.

7. Ontario caregiver amount – You may claim this amount if you are supporting an eligible infirm dependant aged 18 or older:

- your child or your grandchild (or your spouse or common-law partner);
- your parent, grandparent, brother, sister, aunt, uncle, niece or nephew who is resident in Canada (or your spouse or common-law partner)

To calculate this amount, fill out the line 7 section of Form TD1ON-WS.

8. Amounts transferred from your spouse or common-law partner – If your spouse or common-law partner will not use all of their age amount, pension income amount, or disability amount on their income tax and benefit return, enter the unused amount.

9. Amounts transferred from a dependant – If your dependant will not use all of their disability amount on their income tax and benefit return, enter the unused amount.

10. TOTAL CLAIM AMOUNT – Add lines 1 to 9.
Your employer or payer will use this amount to determine the amount of your provincial tax deductions.

Filling out Form TD1ON

Fill out this form only if you are an employee working in Ontario or a pensioner residing in Ontario and **any** of the following apply:

- you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration
- you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed)
- you want to increase the amount of tax deducted at source

Sign and date it, and give it to your employer or payer.

If you do not fill out Form TD1ON, your employer or payer will deduct taxes after allowing the basic personal amount **only**.

More than one employer or payer at the same time

- If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1ON for 2024, you **cannot** claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1ON, check this box, enter "0" on line 10 and do not fill in lines 2 to 9.

Total income is less than the total claim amount

- Tick this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on line 10. Your employer or payer will not deduct tax from your earnings.

Additional tax to be deducted

If you want to have more tax deducted at source, fill out section "Additional tax to be deducted" on the federal Form TD.

Reduction in tax deductions

You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

Forms and publications

To get our forms and publications, go to canada.ca/cra-forms-publications or call 1-800-959-5525.

Personal information (including the SIN) is collected and used to administer or enforce the Income Tax Act and related programs and activities including administering tax, benefits, audit, compliance, and collection. The information collected may be disclosed to other federal, provincial, territorial, aboriginal or foreign government institutions to the extent authorized by law. Failure to provide this information may result in paying interest or penalties, or in other actions. Under the Privacy Act, individuals have a right of protection, access to and correction of their personal information, or to file a complaint with the Privacy Commissioner of Canada regarding the handling of their personal information. Refer to Personal Information Bank CRA PPU 120 on Information about Programs and Information Holdings at canada.ca/cra-information-about-programs.

Certification

I certify that the information given on this form is correct and complete.

Signature _____

Date _____

It is a serious offence to make a false return.



SAFETY TRAINING ACKNOWLEDGEMENT FORM

Please **forward completed form** with **both** the **Employee/Student's and Supervisor's signatures** to UTSC Payroll Services payroll.utsc@utoronto.ca.

EMPLOYEE/STUDENT INFORMATION (PLEASE PRINT):

First Name _____ Last Name _____
 Department/Division _____ Room/Laboratory No. _____
 Position _____ Telephone No. _____
 Email Address _____

It is the responsibility of employee/student to complete safety training courses assigned by the employer and supervisor.

By completing and signing this form, you acknowledge that you must complete the required safety training assigned by your employer and supervisor.

Employee/student's acknowledgement signature required: _____

EMPLOYER/SUPERVISOR/PRINCIPAL INVESTIGATOR INFORMATION (PLEASE PRINT):

It is the responsibility of the Supervisor to ensure the employee/student has met safety training requirements under the Occupational Health and Safety Act.

First Name _____ Last Name _____
 Department/Division _____ Room/Laboratory No. _____
 Telephone No. _____ Date _____

By completing and signing this form, you acknowledge that your staff must complete the required safety training assigned by you and under the Occupational Health and Safety Act.

Supervisor's acknowledgement signature required: _____

Supervisor must review the Safety Training Matrix for Laboratory Personnel or Safety Training Matrix for Administrative & Facilities Staff and highlight the courses applicable to the employee/student's work. The Safety Training Matrix is on the reverse of this form or can be found at: <https://www.utsc.utoronto.ca/hr/health-safety-forms>

Instructions for Accessing Training can be found at: <https://www.utsc.utoronto.ca/ehs/training-information>

For help in course selection, please contact:

UTSC EHS ehs.utsc@utoronto.ca

WELCOME! The Office of EHS welcomes you to the University of Toronto. Please take the time to review this document as it outlines the minimum training requirements for individuals who work in our offices and/or support and maintain our facilities. Please answer the questions in the table below to determine which requirements apply to you. If you answer "yes" the corresponding training/documents apply. You are responsible to ensure that you are aware of your training requirements. Please speak with your supervisor or manager if you have any questions about training and/or registering. Please feel free to contact the Office of EHS should you have any questions, we are here to help and we look forward to meeting you.

Who? Examples include: Facilities & Services, Facilities Management, Ancillary Services, etc. (Register for training at www.ehs.utoronto.ca)

Department-specific training: Some departments (e.g. caretaking) may have tailored specific training for their groups to cover these topics. This training matrix does not eliminate the need for department-specific training (e.g. orientation, equipment usage/maintenance, emergency response, work etc.)

Activity	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
All employees regardless of job function	◆																			◆								
Office worker or works at a computer workstation for more than 3 hrs/day																					◆							
Supervises/Manages other employees																										◆	◆	
Work near but NOT directly with asbestos OR manages repair/maintenance/renovation projects		◆																										
Perform Type 1 or 2 asbestos work *			◆														◆											
Work at heights above 10 feet, closer than 2 feet to the edge and without guardrails				◆																								
Drive or work on Aerial Platform Lifts				◆	◆																							
Work outside in the winter for significant periods of time						◆																						
Work outside in the summer and in hot indoor environments such as the steam tunnels							◆																					
Work in Confined Spaces								◆																				
Work on loading Docks									◆																			
Visits labs - repair/maintenance/renovation										◆												◆						
Uses ladders											◆																	
Transport large/heavy objects in vehicles												◆																
Manually transport materials (lifting, pushing, pulling)													◆															
Work on plumbing traps, clean up BROKEN compact fluorescent lights														◆														
Remove or clean mouldy materials;															◆		◆											
Require awareness of mould remediation, prevention of mould growth but does not perform mould remediation – e.g. property managers, project managers															◆													
Exposure to noise > 85 dBA *																	◆											
Uses respiratory protection																		◆										
Disturb lead-containing materials such as lead paint, lead sheets, leaded glass, etc.																		◆	◆									
Disturb silica-containing materials such as mortar blocks, cement, brick, etc.																		◆	◆									
Uses chemicals																						◆						
Exposed to an unexpected release of hazardous energy from a process/equipment (electricity, fluid pressure, air pressure, kinetic energy, potential energy, pressurized liquids or gas)																							◆					
Transports, receives and ships chemicals under the Transportation of Dangerous Goods																								◆				
Receives packages - biological agents (does not open)																										◆		
Receives packages - radioactive materials (does not open)																											◆	
Key	Requirements	Valid For	Delivery	Key	Requirements	Valid For	Delivery																					
1	EHS 002 Basic Health and Safety Awareness	No expiry	online*	15	EHS 533 Mould: Evaluation and Controlling the Hazard	No expiry	in-class																					
2	EHS 509 Asbestos Awareness OR EHS570 Managing Asbestos Projects (e.g. property managers, project managers)	No expiry	online	16	EHS 529 Noise: Evaluation and Controlling the Hazard	No expiry	online																					
3	EHS 567 Asbestos Training for Type 1 & 2 Asbestos Workers & Their Supervisors (EHS 568 Refresher)	5yrs	in-class	17	EHS 532 Respiratory Protection	2yrs	in-class																					
4	EHS 535 Fall Protection	2yrs	in-class	18	EHS 519 Lead	No expiry	in-class																					
5	EHS 539 Aerial Platform Lift	3yrs	in-class	19	EHS 507 Silica	No expiry	in-class																					
6	EHS 557 Cold Stress	No expiry	online	20	EHS 528 Slips, Trips and Falls	No expiry	online																					
7	EHS 531 Heat Stress	No expiry	online	21	EHS 536 Office Ergonomics	No expiry	online																					
8	Confined Space (campus-specific training will vary)	2yrs	in-class	22	EHS 576 WHMIS for Non-Lab Staff	3yrs	online																					
9	EHS 549 Working in Loading Docks	No expiry	online	23	EHS 527 Lock out Tag out	No expiry	in-class																					
10	EHS 953 Lab Safety Awareness for non-Lab Staff	No expiry	in-class	24	EHS 910 TDG - Chemicals	3yrs	online																					
11	EHS 542 Ladder Safety	No expiry	online	25	EHS 909 TDG - Biologicals	2yrs	in-class																					
12	EHS 547 Load Securement	No expiry	online	26	EHS 908 TDG – Radiation (Receiving only)	3yrs	in-class																					
13	EHS 534 Manual Materials Handling	No expiry	online	27	EHS 303 Job Safety Analysis	No expiry	in-class																					
14	Mercury (Different training depending on tasks)	No expiry	in-class	28	EHS 305 Accident Investigation for Supervisors	No expiry	in-class																					

*Medical Surveillance applicable; Supervisors should contact Occupational Health at 416.978.4476



WELCOME! The Office of EHS welcomes you to the University of Toronto. Please take the time to review this document as it outlines the minimum training requirements for individuals who work in a lab environment. Please answer the questions in the table below to determine which requirements apply to you. If you answer "yes" the corresponding training/documents apply. You are responsible to ensure that you are aware of your training requirements. Please speak with your supervisor or manager if you have any questions about training and/or registering. Please feel free to contact the Office of EHS should you have any questions, we are here to help and we look forward to meeting you.

Who? ALL Research Lab Positions: Principal Investigators, Supervisors, Managers, Technicians, Post Docs, Research Associates, internship students, project students, grad & undergrad students. (Register for training at www.ehs.utoronto.ca)

		Complete this Training Requirement (See Key below)																					
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
Biosafety	ARE YOU A U OF T FACULTY, STAFF OR STUDENT WHO...																						
	will work in a CL1 / CL2 Lab?	◆	◆	◆	◆																		
	will work with human materials (e.g. blood, specimens, tissue, cells)?	◆	◆	◆	◆	◆																	
	will work with viral vectors (e.g. retrovirus, lentivirus, biological agents)?	◆	◆	◆	◆		◆																
Chemical & Laboratory Safety	will ship/receive/import biological agents?	◆	◆	◆	◆			◆															
	will work with/near chemicals?	◆	◆																				
	will use a respirator in the lab?	◆	◆						◆														
	will work with hydrogen fluoride?	◆	◆							◆													
	will work with mercury?	◆	◆								◆												
	will work with molten materials?	◆	◆									◆											
Radiation Safety	will ship chemicals?	◆	◆										◆										
	will work with open and sealed sources?	◆	◆											◆	◆								
	will work with sealed sources only?	◆	◆													◆	◆						
	will work with irradiators *training includes 30 mins of hands-on	◆	◆													◆	◆						
	will receive/ship materials?	◆	◆															◆					
	will receive rad materials?	◆	◆																◆				
	will work with x-ray machines?	◆	◆																	◆	◆		
	will work with open beam class 3B and class 4 lasers?	◆	◆																			◆	◆
Human & Animal Research Safety	Will work with humans or handle live animals/ carcasses/tissue or will have access to a vivarium? Contact your Local Animal Care Committees (LACCs)	◆	◆																				
Research Abroad	Will conduct research work in a lab setting outside of Canada (Contact Safety Abroad Office (safety.abroad@utoronto.ca) & EHS	◆	◆																				
Key	Requirements	Valid For	Delivery	Key	Requirements	Valid For	Delivery																
1	EHS 002 Basic Health and Safety Awareness	No expiry	online	12	EHS 910 TDG Chemical	3yrs	online																
2	EHS 101 WHMIS and Laboratory Safety	3yrs	online	13	EHS 701 Radiation Safety	3yrs	in-class																
3	EHS 601 Biosafety	No expiry	in-class	14	EHS 705 Radiation Safety Refresher	3yrs	online																
4	EHS 602 Biosafety Refresher	1yr	in-class/online	15	EHS 710 Sealed Sources	3yrs	online																
5	EHS 603 Blood Borne Pathogens	No expiry	in-class	16	EHS 715 Sealed Sources Refresher	3yrs	online																
6	EHS 613 Viral Vectors (upcoming)	1yr	online	17	EHS 907 TDG Rad	3yrs	in-class																
7	EHS 909 TDG Bio	2yrs	in-class	18	EHS 908 TDG Rad - receiving only	3yrs	in-class																
8	EHS 532 Respiratory Protection	2yrs	in-class	19	EHS 741 X-ray Safety	3yrs	online																
9	EHS 006 Hydrogen Fluoride	No expiry	online	20	EHS 745 X-ray Safety Refresher	3yrs	online																
10	EHS 111 Mercury Safety Awareness	No expiry	online	21	EHS 731 Laser Safety	3yrs	in-class																
11	EHS 566 Molten materials	No expiry	online	22	EHS 732 Laser Safety Refresher	3yrs	online																

