



MONTHLY SET-UP/CHANGE OF INFORMATION

This form should be submitted to Human Resource Services in accordance with the [Monthly Payroll Schedule](#)

Mr. Ms. Mrs. Miss. Dr. Prof. Misc. Mx.

First & Middle Name (Name on SIN Card)		Known As (Optional)		Last Name (Name on SIN Card)	
SIN		Student No.		Personnel No.	
Street No. and Name		New <input type="checkbox"/> Apt No.	City/Town		Province
Postal Code		Date of Birth (DD/MM/YYYY)		Gender	
Telephone New <input type="checkbox"/>	Email Address		Date of Birth (DD/MM/YYYY)		<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X

If you are a Canadian Citizen, Permanent Resident, or on a Work Permit, you must include your SIN in the space above. Federal regulations permit only the employment of Canadian Citizens, Permanent Residents or holder of Work Permits. Proof of status will be required.

Canadian Permanent Resident Work Permit

Letter of Offer:	<input type="checkbox"/> Attached	Verified by _____
Verification of SIN Card:	<input type="checkbox"/> Returning Employee	<input type="checkbox"/> On File
Work Permit (if applicable)	<input type="checkbox"/> Attached	<input type="checkbox"/> On File
Banking Authorization:	<input type="checkbox"/> Attached	<input type="checkbox"/> On File
Current Year TD1 Tax Form:	<input type="checkbox"/> Attached	<input type="checkbox"/> On File
Current Year TD1ON Tax Form:	<input type="checkbox"/> Attached	<input type="checkbox"/> On File
Safety Training Acknowledgement Form:	<input type="checkbox"/> Attached	<input type="checkbox"/> On File

Starting Date	Ending Date	Type of Work	
CC	CF	Order No.	Fund No.

TYPE OF INCOME:

T4 Income (4% vacation pay will be added)

Amount: \$ _____ Hourly Monthly Total
Hours (Mandatory)

T4A Income (No vacation pay will be added)

Research Fellow Graduate Student
 Research Assistant Undergraduate Student
Amount: \$ _____ Monthly Total

I hereby certify the following conditions apply to this "Research Fellow":

- A. The fellowship is of an award nature on a competitive basis.
- B. The fellowship is working for scholastic recognition and not primarily financial gain.
- C. No duties are required of the fellow other than the pursuit of free and independent research in his area of interest, AND
- D. The fellow is not required to work for any of the donors upon completion of the fellowship.

I hereby certify the following conditions apply to this "Research Assistant":

- A. The assistant is a registered graduate or undergraduate student.
- B. The assistant's work is not undertaken for financial gain.
- C. The project will assist the recipient in qualifying for a degree or to gain scholastic recognition in the field in which research is being carried on.
- D. The direction given by the faculty member is of a general or consultative nature, AND
- E. The assistant is not required to render any service to the University in connection with the award.

Supervisor's Name (Please Print)	Telephone No.
Supervisor's Signature	Date
Discipline	Department

- **Please forward completed forms and all attachments to payroll.utsc@utoronto.ca**
 - Incomplete forms/incorrect information will delay processing.
- For enquiries or questions please email Payroll Services at payroll.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:



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 *If working with any biological agents, a permit is required. Contact EHS Office	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 *If working with high hazard chemicals a High Hazard Chemical Permit is required (contact EHS).	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 *If working with any radiation/x-ray or laser, a permit is required. Contact Office of EHS	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																

