



**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			Apt No.	City/Town	Province	Postal Code
Telephone	Email Address			Date of Birth (DD/MM/YYYY)		Gender <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](mailto:payroll.utsc@utoronto.ca)**
  - Incomplete forms/incorrect information will delay processing.
- For enquiries or questions please email Payroll Services at [payroll.utsc@utoronto.ca](mailto:payroll.utsc@utoronto.ca)