



PAYROLL INFORMATION SHEET FOR NEW EMPLOYEES

****Please complete and send to Catholic Education Centre on first day of hire****

SURNAME: _____ GIVEN NAME: _____

S.I.N.: _____

START DATE: _____

POSITION: _____

DATE OF BIRTH: _____
Month Day Year

GENDER YOU IDENTIFY WITH: _____

O.C.T # (if applicable) _____

R.E.C.E # (if applicable) _____

ADDRESS: P.O. Box: _____

Street Address: _____

Town: _____

Postal Code: _____

Phone No. _____

BANKING INFORMATION: FOR PAYROLL PURPOSES PLEASE ATTACH VOID CHEQUE

Criminal Background Check Provided: Yes to be provided ASAP

Freedom of Information

Personal information on this form will be used for payroll purposes only. Questions regarding the collection of this information should be directed to the Freedom of Information and Protection of Privacy Officer, Superior North Catholic District School Board P.O. Box 610, Terrace Bay, Ontario P0T 2W0. Telephone (807) 825-3209 Ext. 25.

For office use:	Employee #	V.P.	OCT fees	TPP
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