

POSTDOCTORAL FELLOW (PDF) APPOINTMENT FORM

Notes:

1. This form is a confidential, internal communication between the PDF Supervisor, the Faculty of Graduate and Postdoctoral Affairs (FGPA), Human Resources, and Research Accounting.
2. For domestic PDFs FGPA requires a **minimum** of 1.5 months advance notice of the PDF's start date to ensure that they are registered by their start date. For international PDFs, FGPA requires a **minimum** of 3.5 months advance notice of the PDF's start date to allow the PDF time to apply for a work permit.
3. You do not need to submit a Payroll Profile for PDF appointments.

SECTION A: PDF'S INFORMATION

| | | | |
|--|--|--|--|
| PDF Status (choose one): | New PDF | PDF Renewal | PDF Extension |
| PDF Citizenship (choose one): | PDF is a Canadian Citizen/Permanent Resident | | PDF requires a work permit/visa ¹ |
| Full Legal Name (as listed on passport or Government of Canada-issued identification) | | | |
| Family Name _____ | | Given Name(s) _____ | |
| Preferred Name _____ | | Email Address (Carleton email preferred) _____ | |

SECTION B: PDF SUPERVISOR'S INFORMATION

| | |
|----------------------|--|
| Banner ID: _____ | Department/School/Institute: _____ |
| Family Name _____ | |
| Given Name(s) _____ | |
| Preferred Name _____ | Email Address (Carleton email preferred) _____ |

SECTION C: ADMINISTRATIVE and FINANCIAL INFORMATION²

| | |
|--|--|
| Term of Appointment | |
| Start: _____ Month Day Year | End: _____ Month Day Year |
| Funding Source(s): | |
| ❖ PDF Supervisor is funding part or all of this fellowship: | Yes No Funding/Grant Agency: _____ |
| ➤ Supervisor's account details: | Fund _____ Org. _____ Account _____ Program _____ |
| ❖ Will the PDF receive funding from any external source(s)? | Yes No If 'yes', how will the Agency pay the PDF? PDF will be paid directly Carleton will administer funds on behalf of the agency (enter account details below) |
| ➤ External Funding Account Details: | Fund _____ Org. _____ Account _____ Program _____ |
| Funding/Grant Agency: _____ | |

¹ Immigration, Refugees, and Citizenship Canada (IRCC) requires that employers pay a \$230 "Employer Compliance Fee" in order for International PDFs to apply for permission to work in Canada. It is the PDF Supervisor's responsibility to pay this fee.

² PDF appointments paid in whole or in part from Tri-Council grants are subject to eligibility requirements. The PDF Supervisor is responsible for meeting these requirements. You may obtain information on eligibility through Research Accounting.

PDF APPOINTMENT FORM (cont'd...)

PDF Name: _____

Supervisor Name: _____

SECTION C: ADMINISTRATIVE and FINANCIAL INFORMATION (cont'd...)

| Totals below are (choose one): | | Per Period | Per Annum | | | |
|--------------------------------|--|--|-------------------------|--|--|----|
| 1. | Gross Salary/Stipend offered to PDF through funds held by Carleton Supervisor ³ : | | \$ | | | |
| 2. | Add 10% of amount listed in (1), above to cover employer portion of statutory deductions ⁴ : | | \$ | | | |
| 3. | Add \$163.16/month (\$1,957.92/annum) for PDF Benefit Plan ⁵ : | | \$ | | | |
| 4. | Add (1) + (2) + (3), above: | | \$ | | | |
| 5. | Add \$230 for Immigration, Refugees, and Citizenship Canada (IRCC) Fee (International PDFs only): | | \$ | | | |
| 6. | Amount allocated for PDF position through external source(s): External source (choose all that apply): <table border="0" style="display: inline-table; vertical-align: middle;"> <tr> <td style="padding: 0 10px;">Banting</td> <td style="padding: 0 10px;">Fields (Fund 370235)</td> <td style="padding: 0 10px;">Other (agency noted in Section C, page 1)</td> </tr> </table> | Banting | Fields (Fund 370235) | Other (agency noted in Section C, page 1) | | \$ |
| Banting | Fields (Fund 370235) | Other (agency noted in Section C, page 1) | | | | |
| 7. | Total amount offered to the PDF (1) + (6) ⁶ : | | \$ | | | |
| 8. | Total amount from internal sources above (4) + (5) ⁷ : | | \$ | | | |

SECTION D: DECLARATIONS and SIGNATURES

Note: PDF Supervisor must obtain all of the signatures in this section.

I certify that the information provided on this form is, to the best of my knowledge, correct and complete, and that should any additional expenses arise from the current and/or future collective agreements, I will be responsible for them.

 PDF Supervisor Name (Please Print) PDF Supervisor Signature Month Day Year

I approve of the Postdoctoral Fellowship, as presented on this form.

 Chair/Director Name (Please Print) Chair/Director Signature Month Day Year

I approve of the Postdoctoral Fellowship, as presented on this form.

 Faculty Dean Name (Please Print) Faculty Dean Signature Month Day Year

I have reviewed Section C and confirm that, as of this signature date, there are sufficient funds available in the grant holder's account and/or the external funding agency's account, to support this Postdoctoral Fellowship.

 Research Accounting Rep. Name (Please Print) Research Accounting Rep. Signature Month Day Year

³ Note that should your PDF become a member of the Carleton University Postdoctoral Union (CUPU), you will be responsible for any additional expenses arising from the current and/or future collective agreements.

⁴ Applicable only if funding from PDF Supervisor's fund equals at least \$16,280/annum (prorated for shorter appointments).

⁵ You must budget for this expense, but note that it will only apply if your PDF opts into the Benefit Plan at the Family Rate. The cost will be less if the PDF opts into the Single Plan. If the PDF does not opt into a Benefit Plan, this expense will not apply.

⁶ This is the PDF's gross salary.

⁷ Your budget must be at least this much.

PDF APPOINTMENT FORM (cont'd...)

PDF Name: _____

Supervisor Name: _____

SECTION E: CHECKLIST

For PDFs who require a work permit/visa: please confirm that you have transferred the \$230 payment to FGPA for the mandatory Immigration, Refugees, and Citizenship Canada Employer Compliance Fee (to: 100.000-301-719104)

Yes (list journal number below)

N/A

Supervisors in Engineering: please confirm that you have filled in and submitted an Engineering Space Form.

Yes

N/A

SECTION F: COMMENTS

Please enter questions or comments in the space below.

Please send completed form⁸ to FGPA, 512 Tory Building or email to FGPA.EA@cunet.carleton.ca

For information regarding next steps, please contact [FGPA](#).

FGPA Use Only

Based on the information provided above, is the PDF in the union (circle one)?

Yes

No

PDF's Gross Internal Salary:

PDF's Gross External Salary:

External Fund Payment Method:

Total Administered by Payroll

\$ _____

\$ _____

Directly to PDF

Tax Deductible

Tax-Free

Per Period

Per Annum

Per Period

Per Annum

Carleton is Paymaster

\$ _____

\$ _____

I approve of the Postdoctoral Fellowship, as presented on this form.

FGPA Dean Name (Please Print)

FGPA Dean's Approval Signature

Month

Day

Year

I confirm that a scan of this document has been emailed to Payroll.

FGPA Admin. Name (Please Print)

FGPA Admin. Signature

Month

Day

Year

Comments:

Payroll Use Only

PDF's Banner ID: _____

PDF's Position Number: _____

Payroll Representative's Name (Please Print)

Payroll Representative's Signature

Month

Day

Year

Comments:

Human Resources Use Only

Has the PDF opted into the Benefit Plan? (circle one)

Yes

No

If 'yes', circle plan:

Single

Family

HR Representative's Name (Please Print)

HR Representative's Signature

Month

Day

Year

⁸ If you are emailing this document, digital and/or scanned signatures must be included.