

If you are an existing employee, please update your *address information, emergency contact information, direct deposit information and TD1/TD1-ON forms* through eHR at my.ryerson.ca.

**Part 1 - Biographical Information**

Prefix: <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Other:	Surname:	First Name:	Middle Initial:	Sex: <input type="checkbox"/> F <input type="checkbox"/> M
Employee Number:	Social Insurance Number: (if SIN begins with "9" attach copy of study/work permit)		Birthdate (mm/dd/yyyy):	
Home Address (include postal/zip code):			Home Phone Number:	
Mailing (T4) Address <i>if different from above</i> (include postal/zip code):			Other Phone Number: (not required)	

**Part 2 – Emergency Contact**

Emergency Contact (full name):	Relationship to Employee:
Address and Telephone Number:	

**Part 3 – Payroll Deposit**

Bank Name:	Branch Address:
If Banking information is changing, provide effective date (mm/dd/yyyy):	<b>Please ensure that payments are being made to new account before closing old account.</b>

**Important Notes:**

- Ryerson implemented a Paperless Pay Advice initiative in February of 2010. This initiative replaced paper pay statements with online pay advices. You can view your pay advice(s) using Blackboard. Please ensure that your manager arranges for your Blackboard account.
- A **VOID cheque** from your chequing account, a counter cheque or other direct deposit authorization from your bank must be attached to this form. Please ensure attached information is correct.
- Please ensure that your bank transit number and bank mailing address are accurately reflected.
- Please complete TD1 and TD1-ON forms. Basic tax exemptions will apply unless TD1/TD1-ON forms are completed and sent to HR. The forms are available at <http://www.ryerson.ca/hr>.

**Part 4 – Declaration and Acknowledgment**

*I declare the above information is, to the best of my knowledge, true and accurate. I certify that I am eligible for bonding in the Province of Ontario, should that be a requirement of my job. I may be required to validate my academic qualifications through the provision of original transcripts. I agree that I have read, understand and accept the conditions of employment related to the Information Protection Policy. I understand that a breach of confidentiality guidelines and any false statements made above, or on any other official University documents (resumes, applications, etc.), could disqualify me from employment or constitute grounds for dismissal without notice or pay in-lieu thereof. By signing below, I indicate that I understand and agree to these terms and conditions. I understand that the information on this form is collected by Ryerson University to administer my employment relationship with the University. By providing this information, I consent to its use for that purpose.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_