

FA ADDENDUM TO EMPLOYEE REQUEST FORM

Position Title: _____ Program/School/Dept: _____
 (Please indicate course number for part-time instructor appointments in the Position Title section)

Faculty: _____ Start date: _____ End date: _____

1. REASON FOR HIRING: (check applicable box)

- To fill a vacant position: _____
- New position
- Cost recovery
- To replace a faculty member who is: on leave, seconded, or serving in administrative position: _____
- To replace a faculty member who is on long term disability: _____
- To fill a position where less than 50% of the funding is derived from the continuing base grant accorded to UNBC by the province
- To fill a position necessitated by enrolment growth
- To fill new a new position created as a result of the development of new Programs or expansion of existing Programs
- To offer a post-retirement contract (Article 19)
- To fill vacancies in any Program placed on probation for the duration of that probation
- To attract expertise to UNBC which would not otherwise be available
- Other purpose agreed upon by the parties:
 (explain) _____

2. CONTRACT INFORMATION:

Employee's Full Name: (circle one) Dr. Ms. Mrs. Mr. _____

Mailing Address: _____

Phone Number: _____ Personal Email Address: _____

(non-UNBC email address is required for initial set-up of account)

Type of Appointment (circle one): *If this is for a part-time instructor contract please ONLY circle Term (Part-Time)*

Tenured Tenure-track Continuing Probationary Term (Full-time) Term (Part-time)

Rank of Appointment (circle one): *If this is for a part-time instructor appointment please ONLY circle part-time instructor regardless of rank of individual*

Faculty Rank: Lecturer Assistant Associate Professor

Librarian Rank: Librarian 1 Librarian 2 Librarian 3 Librarian 4

Senior Lab Instructor Rank: SLI 1 SLI 2 SLI 3

Term Appointment: Instructor 1 Instructor 2 Instructor 3 Instructor 4

Lecturer Assistant Part-time Instructor Post Retirement

If this is for a part-time instructor appointment, please indicate the following details for this contract:

Campus of Primary Responsibility: _____

3. IMMIGRATION INFORMATION:

Is this person eligible to work in Canada? Yes // No: contact the Office of the Provost for Foreign Worker Recruitment Procedures

4. SALARY INFORMATION:

Nominal Salary: _____ + Stipend: _____ + Market Differential: _____

(Note: effective July 1, 2021 (1) SCH rate = \$2,657.01

Instructor 1 salary = total SCHs assigned x current SCH rate;

Instructor 2 salary = 1.1 x value of total SCHs assigned; Instructor 3 salary = 1.2 x value of total SCHs assigned;

Instructor 4 salary = 1.3 x value of total SCHs assigned)

Sabbatical Credit (max 2 years): _____ Start-up Funds: _____

Course Number: _____ Number of SCHs: _____ Course Name: _____

Other Instructions: _____

5. EMPLOYEE PAID EXPENSES: (check all applicable boxes)

The employee is required to pay for expenses without reimbursement while carrying out the duties of the employment contract, such as supplies, long distance telephone charges, cell phone airtime, and work-space-in-the-home expenses.

- Yes
- No