

EMPLOYMENT CONTRACT

* Shaded areas are mandatory fields

TO BE COMPLETED BY THE CTUDENT									
TO BE COMPLETED BY THE STUDENT FOREIGN STUDENT PERSONAL INFORMATION									
T:41 a			FURE						
Title	Gender				_		Date of Birth		
	Ms.	Mrs.	Mr.	Male Fer	nale 🗆		(D/M/Y)		
					l 0: 1:				
Surname:					Given Name:				
Apt # Street Address					City Province/Territory Postal Code				
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Study	Permi	t Docun	nent Number	Date Signed		Valid Until Date			
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F									
				(D/M/Y)		(D/M/Y)			
TO BE COMPLETED BY THE EMPLOYER					(5//////)				
On-CAMPUS DEPARTMENT OR ON-CAMPUS BUSINESS HIRING THE STUDENT									
Name of on-campus Department or Name of Employer's Name									
Business Hiring the Student									
Obvio adduces whom the world will be resulted					Employer's Cianoture				
Civic address where the work will be performed					Employer's Signature				
Employer's Telephone # ()					Employer's Fax # ()				
Employee's Position Title					Employee's Ste	ort Dot	- Employee	a End Data	
Employee's Position Title					Employee's Sta	art Date	Employee	s End Date	
							_		
					(D/M/Y) (D/M/Y)				
I have accepted this job offer.									
Signat	ure of I	oreign	Student		Date (D/M/Y)				