

Your company logo

Your company name

# New hire form: Sample template

## Employee information

### Personal information

Full name: \_\_\_\_\_  
*Last name* *First name* *Middle initials*

Gender: \_\_\_\_\_ Title (Mr./Ms/Mrs./Other) \_\_\_\_\_

Address: \_\_\_\_\_  
*Street address* *Apartment/unit #*

\_\_\_\_\_

*City* *Province* *Postal code*

Home phone: \_(\_\_\_\_)\_\_\_\_\_ Cellphone: \_(\_\_\_\_)\_\_\_\_\_

Email address: \_\_\_\_\_

Social Insurance Number  
or other government ID: \_\_\_\_\_

Birth date: \_\_\_\_\_ Marital status: \_\_\_\_\_

Spouse's name: \_\_\_\_\_

Spouse's employer: \_\_\_\_\_

Spouse's work phone: \_(\_\_\_\_)\_\_\_\_\_

## Job information

Title: \_\_\_\_\_ Employee ID  
(if applicable): \_\_\_\_\_

Supervisor: \_\_\_\_\_

Work location: \_\_\_\_\_

Email address: \_\_\_\_\_

Home phone: \_(\_\_\_\_)\_\_\_\_\_ Cellphone: \_(\_\_\_\_)\_\_\_\_\_

Start date: \_\_\_\_\_ Salary: \_\$\_\_\_\_\_

## Emergency contact information

Full name: \_\_\_\_\_  
*Last name* *First name* *Middle initials*

Address: \_\_\_\_\_  
*Street address* *Apartment/unit #*

\_\_\_\_\_ *City* *Province* *Postal code*

Primary phone: \_(\_\_\_\_)\_\_\_\_\_ Cellphone: \_(\_\_\_\_)\_\_\_\_\_

Relationship: \_\_\_\_\_

**Other information**

Have you contributed to a pension plan (other than Canada Pension Plan) within the past 30 days?

YES / NO  
(please circle one)

If yes, please indicate the employer & pension plan name: \_\_\_\_\_

For payroll direct deposit purposes, please attach a void cheque to this form.

Please attach a completed and signed TD1 form.

Date: \_\_\_\_\_ Employee signature: \_\_\_\_\_

Print name: \_\_\_\_\_

Date: \_\_\_\_\_ Employer signature: \_\_\_\_\_