

Commencement Notification Form for Non-Online Hires

Last revised: July 2021
 Last reviewed: May 2017
 Next review: May 2018

This form should be used to notify the HRSC of an employee's Commencement

This package previously faxed: Yes No

Please choose one: Internal Hire (existing GOS employee) New Hire (new to GOS) Rehire (previous GOS employee)

Employee Hired from Re-employment List: Yes No Position posted: Yes No Competition # _____

Employee Information

Last Name (Please Print) _____			First Name (Please Print) _____	Middle Name (Please Print) _____	<input type="checkbox"/> Male <input type="checkbox"/> Female
Previous Last Name (if rehire) _____			Employee Number (if internal hire) _____	Social Insurance Number _____	SIN Expiry Date (If begins with 9) _____
Birth Date (DD/MM/YY) _____			Home Phone Number _____	Home Address No. & Street _____	City/Town _____
Postal Code _____			Work Phone Number _____	Work Email _____	Supervisor Name (For Midas HR Alerts) _____
Justice Only: Crown Counsel Certificate Year: _____			Province: _____		

Position Information

Position information: Start Date: _____ End Date: _____ Paylist: _____
 (DD/MM/YYYY) (DD/MM/YYYY)

MIDAS Position Number _____	Job: (Occ Code) _____	Grade (Class Level) _____	Modifier _____
HR Org _____	Working Title _____	Working Location (Street Address) _____	

Position Type: (Please Check One)	Permanent Full Time= PFT	Permanent Part Time= PPT
<input type="checkbox"/> Out of Scope PFT	<input type="checkbox"/> SGEU PPT	<input type="checkbox"/> CUPE PFT
<input type="checkbox"/> Out of Scope PPT	<input type="checkbox"/> SGEU Term with PPT Rights	<input type="checkbox"/> CUPE PPT
<input type="checkbox"/> Out of Scope Non Perm	<input type="checkbox"/> SGEU Term with PFT Rights	<input type="checkbox"/> CUPE Term
<input type="checkbox"/> Ministerial Assistant	<input type="checkbox"/> SGEU Term	<input type="checkbox"/> Labour Service- Permanent
<input type="checkbox"/> Judge	<input type="checkbox"/> Summer Student	<input type="checkbox"/> Labour Service – Perm Rights
<input type="checkbox"/> Contract	<input type="checkbox"/> Co-op Student	<input type="checkbox"/> Labour Service – Term
<input type="checkbox"/> Order in Council	<input type="checkbox"/> Student- Less than Full-Time	<input type="checkbox"/> Other
<input type="checkbox"/> SGEU PFT	<input type="checkbox"/> Labour Service Student	

Pay and Costing

Salary: \$ _____ Hourly \$ _____ Bi-weekly \$ _____ Monthly

Up-in-Range Appointment – **Indicate Name of HRC Providing Approval for Up-in-Range Salary:** _____

Costing Information: Entity _____ / Program _____ / Org _____ / Location _____ / Project (if applicable) _____

Salary Account: _____

Tool Allowance – Fleet Services? Yes No Eligible for Special Northern Leave? Yes No

Eligible for Northern District Allowance? Yes No Location: 1 2 3 4

Other Earnings / Deductions (e.g. parking, CVA, car allowance, housing, etc): _____

EDO and Hours of Work

Date of 1st EDO: _____ EDO Frequency: bi-weekly tri-weekly Start Time _____: _____ am pm
 dd/mm/yyyy Length of Lunch: _____ (mins)

Stat Holidays: Observed Actual Normally works Sat & Sun: Yes No

Please check one:

<input type="checkbox"/> Clerical	<input type="checkbox"/> Field	<input type="checkbox"/> Instructor
<input type="checkbox"/> Office	<input type="checkbox"/> Out of Scope	<input type="checkbox"/> Regulated
<input type="checkbox"/> Shift	<input type="checkbox"/> Unregulated	

Altered Work Agreement Yes No Modified Hours of Work: Yes No Letter of Understanding # : _____

Labour Service - SGEU Section - Check one: Hours of work: Full Time Less Than Full Time

6 7 10 11 12 13 16 17 18 20 21 22 23 25

Subsection

<input type="checkbox"/> Regulated 37 1/3 5/5/4 (F)	<input type="checkbox"/> Modified 5/4 72 Hr Biweekly (M)	<input type="checkbox"/> Pilots Paid Daily Rate (P)
<input type="checkbox"/> Highways Office 5/4 (G)	<input type="checkbox"/> Office 7.2 – 72 Hr Biweekly (O)	<input type="checkbox"/> Field Hours (U)
<input type="checkbox"/> Fires 5/5/4 Modified Biweekly (W)	<input type="checkbox"/> 5/5/4 Modified Biweekly (X)	EDO Schedule <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C

Vacation Pay Type - Paid Days % paid on each cheque

REMINDER: The HRSC cannot process a Commencement without the CRC Status Confirmation email from the CRC Coordinator's office. If you do not have the confirmation email, please find more information on [Taskroom](#).

Manager / Supervisor / Delegate Signature: _____ Date: _____

Manager / Supervisor / Delegate Print Name: _____ Phone Number: _____

Manager Email Address: _____

Routing: Send completed form to: Human Resource Service Centre
 2100 Broad Street Regina, SK S4P 1Y5
 Fax: 306-798-9966 or 1-877-852-9219
 Email: hrsc@gov.sk.ca

