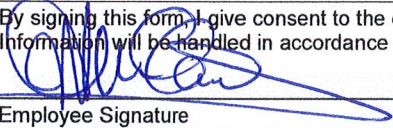
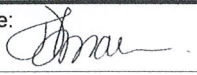


PERSONNEL ENROLLMENT FORM

Company Name		CANADIAN CAMPUS COMMUNITIES	
Language of preference		<input checked="" type="checkbox"/> English	<input type="checkbox"/> French
Employee Information & Authorization			
Surname McComb		First Name Jennifer	Middle Initial
Street Address 17 Terra Nova		City Kirkland	Province Quebec
Postal Code H9J 1M8			
Business Number ()	Business Cell Number ()	Work Email Address	Birth Date (dd/mon/yy) 16/11/1971
Gender <input checked="" type="checkbox"/> F <input type="checkbox"/> M			
Personal Number ()	Personal Cell Number 514-865-8501	Personal Email Address jamwerks@yahoo.ca	Social Insurance Number 269 123 386
By signing this form, I give consent to the collection, use, and disclosure of my personal information for the purposes of payroll, benefits, and HR services. Information will be handled in accordance with legislative requirement. I confirm that all information provided is correct.			
 Employee Signature		JANUARY 15 2023 Date	
Position Information			
Employment Status Permanent <input checked="" type="checkbox"/> FT <input type="checkbox"/> PT <input checked="" type="checkbox"/> Benefits Temporary <input type="checkbox"/> FT <input type="checkbox"/> PT		Position Title Assistant General Manager	Province of Employment Quebec
Start Date: mm/dd/yy) 01/23/2023		Department / Report to for Time & Attendance: Jennifer Donovan Position Code: <input checked="" type="checkbox"/> Admin 5000 <input type="checkbox"/> Leasing 5400 <input type="checkbox"/> Maintenance 5100 <input type="checkbox"/> HouseKeep 5300 <input type="checkbox"/> CA 5451 <input type="checkbox"/> Temp Maint 4150	Standard Weekly Hours: Yearly Vacation Allowance: STD Days End Date (if applicable) (mm/dd/yy)
Location: <input type="checkbox"/> Parkside 819 <input type="checkbox"/> Corporate 012 <input type="checkbox"/> Centennial College 813 <input type="checkbox"/> CampusOne 814 <input checked="" type="checkbox"/> Campus1 Montreal 827 <input type="checkbox"/> Other _____			
Earnings Information			
<input checked="" type="checkbox"/> Annual Salary \$80,000 OR <input type="checkbox"/> Hourly Wage _____			
<input type="checkbox"/> Monthly Housing Benefit _____ <input type="checkbox"/> Other _____ Description of Other _____			
Submissions in Addition to Personnel Enrollment Form			
<input checked="" type="checkbox"/> Offer Letter Attached <input checked="" type="checkbox"/> Employment Agreement Attached <input type="checkbox"/> A.B.C. Application Form Attached <input type="checkbox"/> H.S.A. Application Form Attached <input type="checkbox"/> For new Positions/Roles – Include Job Description or generalized description of job duties			
Company Authorization			
Primary Approval Name (Please Print): Jennifer Donovan		Signature: 	Position Title: General Manager
Business Number : (514) 273-7626		Email Address: jdonovan@studenthousing.com	
Secondary Approval Name (if required) (Please Print):		Signature:	Position Title:
Additional Information for Fennecan			