

# THE UNIVERSITY OF BRITISH COLUMBIA



Department of Mechanical Engineering  
6250 Applied Science Lane  
Vancouver, BC Canada V6T 1Z4

**EMPLOYMENT CONTRACT**    Tel: 604-822-2781  
Fax: 604-822-2403

**NOTE: Foreign students can only work at the school where authorization to study was given by Citizenship and Immigration Canada**

\* Shaded areas are mandatory fields

| <i><b>TO BE COMPLETED BY THE STUDENT</b></i>   |  |             |  |   |
|--|--|-------------|--|---|
| <b>FOREIGN STUDENT PERSONAL INFORMATION</b>  |  |             |  |   |
| <b>Title</b><br>Ms.   Mrs.   Mr.   | <b>Gender</b><br>Male <input type="checkbox"/> Female <input type="checkbox"/> |             | <b>Date of Birth</b><br>(D/M/Y)                |   |
| <b>Surname</b>   |  |             | <b>Given Name</b>                              |   |
| <b>Apt #</b>   | <b>Street Address</b>  | <b>City</b> | <b>Province/Territory</b>                      | <b>Postal Code</b>                          |
| <b>Study Permit Document Number</b><br>F _____   | <b>Date Signed</b><br>_____ (D/M/Y)  |             | <b>Valid Until Date</b><br>_____ (D/M/Y)       |   |
| <i><b>TO BE COMPLETED BY THE EMPLOYER</b></i>  |  |             |  |   |
| <b>ON-CAMPUS DEPARTMENT OR ON-CAMPUS BUSINESS HIRING THE STUDENT</b>   |  |             |  |   |
| <b>Name of on-campus Department or Name of Business Hiring the Student</b><br>Department of Mechanical Engineering<br>The University of British Columbia |  |             | <b>Employer's Name (Please print)</b><br>_____ |   |
| <b>Civic address where the work will be performed</b><br>6250 Applied Science Lane   |  |             | <b>Employer's Signature</b><br>_____           |   |
| <b>Employer's Telephone (604 ) 822-2781</b>  |  |             | <b>Employer's Fax ( 604 ) 822-2403</b>         |   |
| <b>Employee's Position Title</b><br>Graduate Research Assistant  |  |             | <b>Employee's Start Date</b><br>_____ (D/M/Y)  | <b>Employee's End Date</b><br>_____ (D/M/Y) |
| <b>I have accepted this job offer.</b>   |  |             |  |   |
| _____<br><b>Signature of Foreign Student</b>   |  |             | _____<br><b>Date (D/M/Y)</b>                   |   |