

Office of the Deputy Provost (Academic Operations and Planning) 421 Henry Marshall Tory Building 1125 Colonel By Drive Ottawa, ON K1S 5B6 Tel: (613) 520-2600, ext. 7067

IMPORTANT INFORMATION REGARDING THE HIRING PROCESS FOR A POSTDOCTORAL FELLOW

Please read this document before hiring a Postdoctoral Fellow and contact pdf.coordinator@carleton.ca if you have any questions. Thank you!

Once you have read this document, please complete the Postdoc Appointment Form below, with all appropriate signatures, to begin the appointment process.

Note that this form is a **confidential**, internal communication between the Postdoc Supervisor, the Office of the Deputy Provost (ODP), Human Resources, and Research Accounting.

1) HOW FAR IN ADVANCE DO I NEED TO APPOINT A POSTDOC?

- a. For domestic postdocs: ODP requires a <u>minimum</u> of 1.5 months' advance notice of the postdoc's start date to ensure that they are registered by their start date. This also ensures that their first payday is not missed.
- b. For international postdocs: ODP requires a **minimum** of 3.5 months' advance notice of the postdoc's start date to allow time for applying for a work permit.

2) WHAT IS THE MINIMUM GROSS SALARY/STIPEND REQUIRED TO HIRE A POSTDOC?

a. Minimum hosting salaries for the current collective agreement are as follows:

i.M ay 1, 2021 to April 30, 2022: \$36,293/annum.

3) ARE THERE ANY OTHER FEES THAT I SHOULD CONSIDER?

- a. On May 1 of each year of the current collective agreement, unionized postdocs will receive a 2% annual salary increase. Please ensure that you budget for this, for the months that will be affected.
- b. If your postdoc requires a work permit, please see point 7 below for fee details.
- c. Note that payment of any additional expenses resulting from collective agreements are the responsibility of the Postdoc Supervisor.

4) DO I NEED TO SUBMIT A PAYROLL PROFILE FOR POSTDOC APPOINTMENTS?

a. No. Payroll information is included in the Postdoc Appointment Form and is sent by the Postdoc Coordinator to Payroll Services.

5) IS MY POSTDOC PART OF THE POSTDOCTORAL UNION?

a. Not all postdocs are unionized. Unionization depends on funding and location, but in general, the postdoc is in the union if their supervisor is contributing at least 50% of the minimum hosting salary.

6) ARE POSTDOCS ELIGIBLE FOR BENEFITS AND WHO IS RESPONSIBLE TO PAY THE PREMIUMS?

- a. All postdocs are eligible for benefits; however, they are not automatically enrolled in the plan.
- b. If your postdoc is in the union and they opt into the benefit plan, you will be responsible for paying 70% of the monthly benefit premiums. **You must budget for this expense**, but it will only apply if your postdoc opts into the benefit plan. The Family Rate is more expensive than the Single Rate, so the

Family Rate must be allocated for in the budgeting. The cost will be less if the postdoc opts into the Single Plan. If the postdoc does not opt into a Benefit Plan, this expense will not apply. You must budget for this expense in advance because your postdoc will have <u>31 days</u> from their start date to decide whether to opt in or not.

- c. If your postdoc is not in the union, then they are required to pay 100% of their monthly benefit premiums.
- d. The Benefit plan is available for review here.

7) WHAT IF MY POSTDOC NEEDS A WORK PERMIT?

- a. It is your responsibility to make sure that your postdoc is eligible to work in Canada.
- b. There are two sides to a postdoc work permit application:
 - i. The postdoc's application, for which they are responsible, and;
 - ii. The employer's application. Immigration, Refugees, and Citizenship Canada (IRCC) requires that employers pay a \$230 "Employer Compliance Fee" in order for international postdocs to apply for permission to work in Canada. This fee is paid through the Office of the Deputy Provost, so the postdoc supervisor is not responsible for this amount.

Ready to get started? The process begins with the POSTDOC APPOINTMENT FORM below.



PLEASE READ THE FAQs FOR HIRING POSTDOCTORAL FELLOWS BEFORE PROCEEDING!



POSTDOCTORAL FELLOW APPOINTMENT FORM

| SECTION A: POSTDOCTORAL FELLOW INFORMATION | | | | | | | | | |
|--|---|-------------------------|--------------------|---|------------|--|-------------|----------------------------|--|
| Postdoc Status (choose one): New | | | | New Contract (change in salary, funding source or supervisor) | | | | | |
| Postdoc Citizenship (choose one): Canadian Citizen | | tizen | Permanent Resident | | | International (requires a work permit) | | | |
| Full Lega | l Name (as listed on p | passport): | | | | | | | |
| Family Name (surname/last name) | | | | | Given Name | (s) | | | |
| Email Add | ress (Carleton email pre | ferred) | | | | | | | |
| Where will the postdoc be working? Carleton University Other location: | | | | | | | | | |
| SECT | 'ION B: POS' | rdoc supervi | SOR'S IN | FORMATIO | NC | | | | |
| | | | | | | | | | |
| Banner ID | | | Departm | Department/School/Institute | | | | | |
| | | | | | | | | | |
| Family Name (surname/last name) | | | | Given Name(s) | | | | | |
| | | | | | | | | | |
| Email Add | ress (Carleton email pref | erred) | | | | | | | |
| SECT | ION C: TOP | C OF RESEAR | CH | | | | | | |
| Brief de | scription of the are | a or topic of research: | | | | | | | |
| | | | | | | | | | |
| SECTION D: ADMINISTRATIVE and FINANCIAL INFORMATION | | | | | | | | | |
| Term of | Appointment: | | | | End: | | | | |
| | Start: | Month | Day Y | ear | Mor | nth | Day | Year | |
| A) Fur | ding Source(s): nding is held in postdo pervisor's research count at Carleton | oc Yes | No | Funding/ Grant Agency: | | | | | |
| i. Su | pervisor's | | | | | | | | |
| | | Fund | Org. | Account | | Program | % of salary | (if more than one account) | |
| _{ii.} ac | f more than one count - pervisor's | | | | | | | | |
| | count details: | Fund | Org. | Account | | Program | % of salary | (if more than one account) | |

| Will the postdoc receive funding from any external B) sources not held in postdoc supervisor's research account | | Yes | No | If 'yes', how will the Agency pay the postdoc? | Postdoc will be paid directly | Carleton will administer funds on behalf of the agency (enter account details below) | | |
|--|---|---|--------------|--|-------------------------------------|--|------------------------------------|--|
| 111. | xternal Funding ccount Details: Fund | | Org. | Account | Prograr | | | |
| | | | | | | | | |
| SEC1 | rion d: administr | RATIVE an | d FIN | ANCIAL INFOR | RMATION (con | tinued) | | |
| *No | te: Totals below are PER A | ANNUM. OD | P and P | ayroll will prorate | this annual salar | y/stipend for sh | orter appointments. | |
| | | | | | | 1 | | |
| # | Details | | | | | Amount | Confirmed Amount (ODP Use Only) | |
| 1. | Gross Salary offered to postdoo | \$ | | | | | | |
| 2. | Add 10% of amount listed in (1 | \$ | | | | | | |
| 3. | Add \$2,483.40/annum for Post | \$ | | | | | | |
| 4. | Amount allocated for postdoc position through external source(s): External funding source: | | | | | \$ | | |
| 5. | Total amount offered to the po | Total amount offered to the postdoc (this is their gross annual salary): (1) + (4): | | | | | | |
| 6. | Total amount budgeted from in | | \$ | | | | | |
| *Note: | : Every unionized postdoc r | eceives a 2% | salary ir | ncrease on May 1 of | each vear. Please | e budget for this a | amount. | |
| | TION D: DECLARAT | | | | | | | |
| | y that the information prov nsible for current and/or fu | | | = | _ | t and complete, a | nd that I am | |
| Postdoc | Supervisor Name (Please Print) | Postdoc Sup | pervisor Sig | gnature | Month | Day Ye | ear | |
| I appro | ve of and support the Postdoc | ctoral Fellowsh | ip, as pre | esented on this form. | | | | |
| Chair/Di | rector Name (Please Print) | Chair/Direct | tor Signatu | ire | Month | Day Y | ear | |
| l appro | ve of and support the Postdoo | ctoral Fellowsh | ip, as pre | esented on this form. | | | | |
| Faculty [| Dean Name (Please Print) | Faculty Dea | n Signatur | e | Month | Day Y | ear | |
| | reviewed Section C and confirmal funding agency's account, to | | _ | | fficient funds availa | ble in the grant ho | der's account and/or the | |
| Financia | al Administrator Name (Please Prin | nt) Financial A | dministrat | or Signature | Month | | 'ear | |

| SECTION E: COMMENTS (Please enter questions or comments in the space below) | | | | | | | |
|---|--|--|--|--|--|--|--|
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Please send the completed form to $\underline{\texttt{pdf.coordinator@carleton.ca}}$