

Extend or Renew a Postdoctoral Fellow

SECTION A: POSTDOCTORAL FELLOW INFORMATION

Contract Status (choose one): Extension (1 – 11 months) Renewal (12+ months) New Contract (change in conditions of contract)

Postdoc Citizenship (choose one): Canadian Citizen Permanent Resident International (requires a work permit)

Full Legal Name (as listed on passport):

Family Name (surname/last name)

Given Name(s)

Email Address (Carleton email preferred)

SECTION B: POSTDOC SUPERVISOR'S INFORMATION

Banner ID

Department/School/Institute

Family Name (surname/last name)

Given Name(s)

Email Address (Carleton email preferred)

SECTION C: FINANCIAL INFORMATION

Term of Extension or Renewal:

Start:

Month

Day

Year

End:

Month

Day

Year

Funding Source(s):

A) **Part or all** of funding is coming from postdoc supervisor's research account(s): Yes No Funding/Grant Agency: _____

i. Supervisor's account details: Fund Org. Account % of salary (if more than one account)

ii. ***If more than one account -** Supervisor's account details: Fund Org. Account % of salary (if more than one account)

B) Will the postdoc receive funding in **their own name** from any **external source(s)?** 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)

iii. External Funding Account Details: Fund Org. Account

SECTION C: FINANCIAL INFORMATION (continued...)

***Note: Totals below are PER ANNUM. ODP and Payroll will prorate this annual salary for shorter appointments.**

#	Details	Amount	Confirmed Amount (ODP Use Only)
1.	Gross salary offered to postdoc through funds held by Carleton Supervisor (PI) in research account:	\$	
2.	Add 11% of amount listed in (1) above to cover employer portion of statutory deductions:	\$	
3.	Add \$3,000/annum for Postdoc Benefit Plan:	\$	
4.	Amount allocated for postdoc position through <u>external source(s)</u> : *External funding source is any funds not being transferred to supervisor's research account at Carleton External funding source:	\$	
5.	Total amount offered to the postdoc (this is their gross annual salary): (1) + (4):	\$	
6.	Total amount budgeted from internal sources above (add 1 – 3 above):	\$	

SECTION D: DECLARATIONS and SIGNATURES

I certify that the information provided on this form is, to the best of my knowledge, correct and complete, and that I am responsible for current and/or future expenses relating to this fellowship.

Postdoc Supervisor Name (Please Print)

Postdoc Supervisor Signature

Month

Day

Year

I have reviewed Section C and confirm that, as of this signature date, there are sufficient funds available in the grant holder's account and/or the external funding agency's account, to support this Postdoctoral Fellowship.

Financial Officer Name (Please Print)

Financial Officer Signature

Month

Day

Year

SECTION E: COMMENTS