## **APPLICATION FOR FULL-TIME CLINICAL ACADEMIC POSITION**

Name:	Street Name/#:
Telephone #:	City/Province:
E-mail:	Country:
Fax #:	Postal Code:
Date of Completion of MD or equivalent:	University:
Degree:	
Specify Specialty Certification:	
Primary Practice Specialty:	
Licensure:	
CPSO Year: RCPSC Year:	Other Year:
All qualified candidates are encouraged to apply. To assist the University in complying with the Temporary Foreign Worker Program (TFWP), if required, please provide a response to the following: Are you a Canadian Citizen or Permanent Resident?	
<b>DOCUMENTATION REQUIRED:</b> Please attach your CV and all documents requested in the job posting.	
<b>DECLARATION:</b> All of the information I have given in this application is true and complete.	

Signature

Date