**Visiting Professor Work Visa**

**Employer Compliance Application**

Send the following information to your HR Academic Coordinator.

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| --- | --- |
|  | **Comments** |
| 1. Copy of letter of offer/invitation of engagement | Attached |
| 1. Copy of CIC receipt, including invoice # | Attached  Invoice #: |
| 1. Information supporting the use of the LMIA-exemption | N/A |
| 1. Departmental contact information | **Name:** Patricia Cayetano  Address: Dept of Laboratory Medicine and Pathobiology, Faculty of Medicine  University of Toronto  1 King’s College Circle, Toronto, Ontario M5S 1A8  **Phone:**  416-978-8757  **Email:**  patricia.cayetano@utoronto.ca |
| 1. Employee information |  |
| * 1. Name as shown on passport |  |
| * 1. Date of birth |  |
| * 1. Country of birth |  |
| * 1. Gender |  |
| * 1. Country of residence |  |
| * 1. Citizenship |  |
| * 1. Passport number |  |
| 1. Will the work permit application be made inside or outside of Canada? |  |
| 1. Will the compliance fee be charged back to a grant? If yes, name of primary grant holder. | Yes  Grant: XXX (cfc, fund)  Primary Grant Holder: |