

**UNIVERSITY OF NEW BRUNSWICK**  
**INTERNATIONAL POSTDOCTORAL FELLOWSHIP**  
**NEW OFFER RECOMMENDATION FORM**  
(ONLY TYPED FORMS WILL BE ACCEPTED)

***SECTION A: Personal Information***

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GIVEN NAME(S): \_\_\_\_\_ SURNAME: \_\_\_\_\_  
(Note: *Please enter all names as they appear on this person's Passport*)

DATE OF BIRTH (MM/DD/YYYY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_ SEX: \_\_\_\_\_

COUNTRY OF BIRTH: \_\_\_\_\_

COUNTRY OF RESIDENCE: \_\_\_\_\_

CITIZENSHIP(S): \_\_\_\_\_ PASSPORT NUMBER: \_\_\_\_\_

MAILING (HOME) ADDRESS: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DATE OF RECEIPT OF PHD (MM/DD/YY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

***SECTION B: Offer Information***

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TERM – Commencing (MM/DD/YYYY): \_\_\_\_\_ Ending (MM/DD/YYYY): \_\_\_\_\_

NAME OF SUPERVISOR(S): \_\_\_\_\_

FACULTY: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

INDICATE **ALL** PHYSICAL LOCATION OF WORK: UNBF UNBSJ OTHER

If “other”, provide name and address: \_\_\_\_\_

MAIN DUTIES OF POSTDOCTORAL FELLOW: \_\_\_\_\_



**SECTION D: Work Permit Information**

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DOES YOUR CANDIDATE HAVE AN EXISTING WORK PERMIT? YES NO

IF YES, IS IT AN OPEN \_\_\_\_\_ OR A POST-GRADUATE \_\_\_\_\_ WORK PERMIT?

IF the work permit is **NOT** a POST-GRADUATE WORK PERMIT (PGWP), you must provide a UNB account number to charge the \$230.00 Employer Compliance Fee to as a new work permit is necessary:

ACCOUNT NUMBER(S): \_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_

(If you do not have signing authority on this account, please have someone with that authority initial here \_\_\_\_\_ to approve the use of this account.)

**SECTION E: Required Documentation – Please attach to this form and submit**

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*Please attach the following:*

- 1) A current CV
- 2) Two Letters of Recommendation/Reference (Proposed supervisor cannot serve as a reference)
- 3) Proof of completion of PhD program (copy of PhD certificate or memo from University required)
- 4) Proof of sponsoring research agency (only if candidate is coming with their own funding)
- 5) A copy of existing, open or Post Graduate work permit (if applicable)
- 6) A clear copy of this individual’s current passport photo page

**SECTION F: Signatures of Authorization**

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\_\_\_\_\_  
Postdoctoral Supervisor - Printed Name and Signature Date

\_\_\_\_\_  
Department Chair - Printed Name and Signature Date

**APPROVAL**

\_\_\_\_\_  
Dean of Faculty – Printed Name and Signature Date

\*\*Send form and supporting documentation to [postdoc@unb.ca](mailto:postdoc@unb.ca) for further processing\*\*

\_\_\_\_\_  
Signature of Vice-President (Research) Date