UAB UAHSF New Faculty Form

Form should be completed and emailed to PhysicianOnboarding@uabmc.edu

**PAF AND Copy of signed offer letter for each physician must be provided with this form

	Dept./Divis	sion to Complete					
New Faculty Member Name							
Faculty Rank							
HSF/UAB Title, if different than Faculty Rank							
UAB Assignment (New Hire, Rehire, Transfer)							
Department							
Division							
Entity (UAB, HSF, Both)							
Physician Personal Email (best email to contact)							
Physician Phone Number (best phone number to							
contact)							
	Information N	leeded to Schedule					
	Pre-Employment Health & HR Visit						
Department HR Contact							
For Drug Screening Purposes - Is Candidate a							
Current UAB Employee or Resident/Fellow							
(through the GME Office)? Yes or No							
Date (Provide dates, mark "N/A", or "to be							
scheduled")							
Dept. meetings/appointments to be scheduled (if dept. would like to schedule departmental meetings on date of pre-employment health/HR visit)							
Parking - what garage/lot will physician likely							
park?							
	Information Ne	eded for I-9 Purposes					
	Yes	No					
Is the Faculty Member legally authorized to work in the United States?							

Will the Faculty Member now or in the future		
require sponsorship for employment visa status		
(e.g., H-1B or other)?		
*** Must provide completed fo	rm with PAF and copy o	of Signed Offer Letter

The patient sort in displace.													
Form should be com	pleted and ema	iled to Physician	Onboarding@ua	bmc.edu									
**PAF AND Copy of	signed offer lette	er for each phys	ician must be pro	ovided			ı		1	Τ	1		
				(Multiple Physicians)									
New Faculty Member Name	Faculty Rank	HSF/UAB Title, if different than Faculty Rank	UAB Assignment (New Hire, Rehire, Transfer)	Department	Division	Entity (UAB, HSF, Both)	Physician Phone Number (best phone number to contact)	Dept HR Contact	For Drug Screening Purposes - Is Candidate a Current UAB Employee or Resident/Fellow (through the GME Office)? Yes or No	Dept. Scheduled Visits Prior to Anticipated Start Date (Provide dates, mark "N/A", or "to be scheduled")	appointments to be	Parking - what garage/lot will physician likely park?	

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Attach copy of	Is the Faculty Member legally authorized to work in the	Will the Faculty Member now or in the future require sponsorship for employment visa										
signed Offer Letter	United States?	status (e.g., H-1B or										
& PAF	Yes / No	other? Yes / No										