



IWK Health

Your Help Guide for Online Onboarding
August 2024

Contact onboarding@iwk.nshealth.ca for further assistance

IWK Onboarding Guide

IWK Health uses an online onboarding platform to

- confirm information such as your legal name, date of birth, and contact information
- collect documents such as proof of education and criminal record check results
- complete tax forms
- review key IWK policies

The onboarding module is a series of panels that will collect all the information we need to confirm your employment and get you set up in our payroll and scheduling systems. The module will take approximately 30 minutes from start to finish. This guide reviews each panel in detail. **Each onboarding package is customized based on the type of position, so there may be panels that do not apply to you and either will not display or can be skipped.**

Images and text from the panels within this guide may have been updated since its creation

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Your New Hire Checklist

Attached to the email with your offer letter (Subject: IWK New Hire Email), you will find a checklist that has been created specifically for your new position. It lists all the documentation and information required for your onboarding such as proof of education, license/registration, and banking information.

Please ensure you review the checklist prior to starting your onboarding. We strongly recommend you gather and prepare digital versions of your documents before starting your online onboarding module.

The top section lists items that you will need to provide within the online onboarding module.



New Hire Checklist

Cashier

The following list will help you gather and prepare the required documents to be uploaded/completed within the Online Onboarding Module. **Please Note: The requested documentation is required a minimum of five (5) business days before your scheduled start date.**

New Hire Documentation and Information	Instructions	Complete
New Hire Information	You will complete this in the online Onboarding module by updating your personal information (full legal name, address, date of birth, emergency contact information, etc.).	<input type="radio"/>
Social Insurance Number We are required by federal regulation to verify your SIN number (e.g. copy of SIN card or current Government-issued T4 showing full name and complete SIN Number).	You may upload a copy as part of the online Onboarding module.	<input type="radio"/>
Proof of Identification We require ONE valid piece of Government-issued identification (e.g. driver's license, birth certificate, passport)	You may upload a copy as part of the online Onboarding module.	<input type="radio"/>
Proof of Eligibility to Work in Canada (if applicable) <i>Work Permit, Study Permit, Visa, etc. if <u>not</u> a Permanent Resident of Canada or Canadian Citizen.</i>	You may provide details and upload a copy of your documentation as part of the online Onboarding module.	<input type="radio"/>
Banking Information Please provide a void cheque or direct deposit slip from your bank. Banking information must be in your name.	Please upload documentation as part of your online Onboarding process.	<input type="radio"/>

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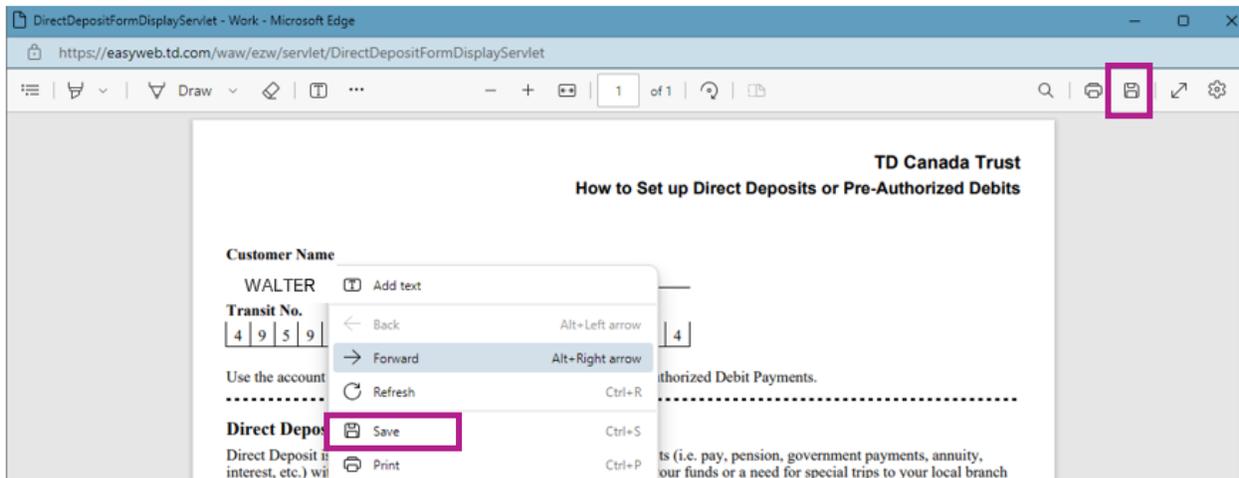
The bottom section lists tasks for you to complete outside of the online onboarding module

New Hire Tasks	Instructions
Occupational Health, Safety and Wellness Pre-Employment Screening	To schedule an appointment with Occupational Health, Safety & Wellness, call 902-470-7949 or email ohsw@iwk.nshealth.ca .
Obtain IWK Photo ID Badge	The completed <i>Authorization for Identification Pass Form</i> will be obtained from your Hiring Manager on your first day of work. Please follow the instructions on the form
Complete New Employee Orientation	Information on New Employee Orientation will be provided upon the completion of Onboarding. This information will be sent to you via e-mail.

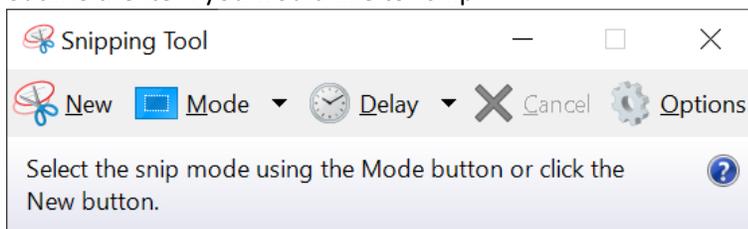
If you are unable to supply or complete the required documents electronically through the online Onboarding module, please contact Human Resources at 902-470-8012 or at onboarding@iwk.nshealth.ca to make alternative arrangements.

Preparing Digital Files

For documents you are accessing online such as a direct deposit form from your bank, we recommend downloading the PDF directly from your online banking portal. If the file does not automatically download as a PDF, look for the option to save in your browser's tool bar, or by right-clicking over the document.



We also recommend using Snipping Tool. This tool is on most Windows based computers. Click New and outline the item you would like to “snip.”



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If you have access to a scanner, test scan your first document and make sure the scanner has captured the entire document and saves it into a legible file. You may need to wipe a smudge from the glass of the scanner, adjust the resolution or change from full colour to greyscale.

You may also take photos of your documents. Please lay the document as flat as possible and take the photo as close as you can.

Documents must be legible

Onboarding Email Notification

Your onboarding email (Subject: IWK New Hire Onboarding) contains the hyperlink to the online onboarding module, as well as a PDF attachment of the forms package required for your Pre-Screening Appointment with Occupational Health Safety and Wellness.

Save this email until you complete your online onboarding module in full. You can start the module and come back to finish it later. The system will save your progress and will return you to the step where you left off during your previous login. You will need this hyperlink to re-access the onboarding module.

- Click the 'To start the Onboarding process click here' link in the email to access the Onboarding module

Example email



Dear WALTER WAFFLES,

Welcome to IWK Health!

Congratulations on being offered a position with IWK Health! The next stage in our hiring process is Onboarding, which will allow you to complete the paperwork associated with your hire. The forms outlined on the New Hire Checklist sent with your Letter of Offer have been packaged electronically for you in the Onboarding Module for completion.

To start the Onboarding process [click here.](#)

It is mandatory that you complete Onboarding a **minimum of five (5)** days prior to your start date, so please begin this process promptly.

In addition to Onboarding, you are required to complete a **Pre-Employment Health Screening Appointment with Occupational, Health, Safety and Wellness (OHSW) within 30 days of your first day of work.** This is an important step in the new hire process and supports a healthy and safe work environment for you and your colleagues. **Please see attached the required four (4) page OHSW forms package** and supplementary information regarding the OHSW requirements. To schedule your appointment or ask questions related to the OHSW requirements, please call 902-470-7949 or email ohsw@iwk.nshealth.ca.

If you have questions or concerns on how to complete Onboarding, please contact Human Resources at 902-470-8012 or email us at Onboarding@iwk.nshealth.ca. We wish you all the best in your new role here at the IWK Health Centre!

Sincerely,

IWK Recruitment Team

Password/Security Question

After you click on the link in the onboarding email you will see the below screen, asking you to create your password and security question.

IMPORTANT: Make note of your password; you will be prompted to enter your password the end of the module. You will also need your password if you are not able to complete your module in a single visit.

Instructions:

Create and type a password in the **Password** field.

Re-enter your password in the **Re-Enter Password** field.

Select a security question from the **Security Question** menu.

Enter the answer for your security question in the **Security Answer** field.

Create your Password and Security Question.

User Name	WWAFFLES6626	Last Name	WAFFLES
First Name	WALTER	Re-Enter Password
Password	Security Question	Mother's Maiden Name
Security Answer		

Remember security answer is case sensitive.

Click [Start Employee Wizard](#) to complete new hire forms.

[Start Employee Wizard](#)

Onboarding Module Basics

You can navigate to the next panel or go back to a previous panel by using the Back and Next buttons at the bottom of each panel.

Payroll Information (WALTER WAFFLES)
New Employee Step

Please complete the sections below to be set up for direct deposit.

Enter your Social Insurance Number (no hyphens)

Please upload proof of your SIN Number, a copy (or photo) can be uploaded by clicking 'Browse' followed by 'Upload'. Proof must include a document or card with all 9 digits of the number visible (SIN Card, CRA, Service Canada documents accepted).

Enter your Date of Birth

Please upload proof of your date of birth, a copy (or photo) can be uploaded by clicking 'Browse' followed by 'Upload'. Proof must be a valid government ID, such as Birth Certificate, Driver's License, Passport.

The banking information provided here will be considered authorization to use for direct deposit. Please complete the direct deposit information and upload a void cheque or direct deposit form from your banking institution.

Bank Country: Canada

Buttons: Cancel, Back, Next

You can use the Cancel button to leave the module – you will then have the option to close **without** saving, or close **with** saving (Save and close)

Are you sure you want to Cancel?

If you close without saving, all the updated data will be lost.

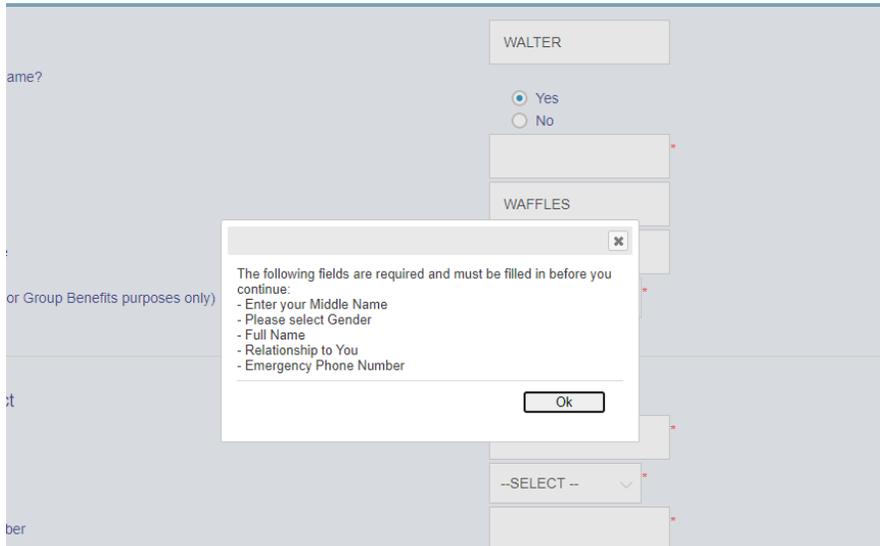
Buttons: Close without Saving, Save and close

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The series of panels will ask for you to type text or attach a document.

There is often instruction or prompts that will give you directions if you have missed a field or need to make a correction.

If you missed a mandatory field, when you try to advance to the next panel, you will receive a prompt that looks like the image below to instruct you on what fields need to be corrected.



The screenshot shows a web form with several input fields. A modal dialog box is open in the center, displaying the following text:

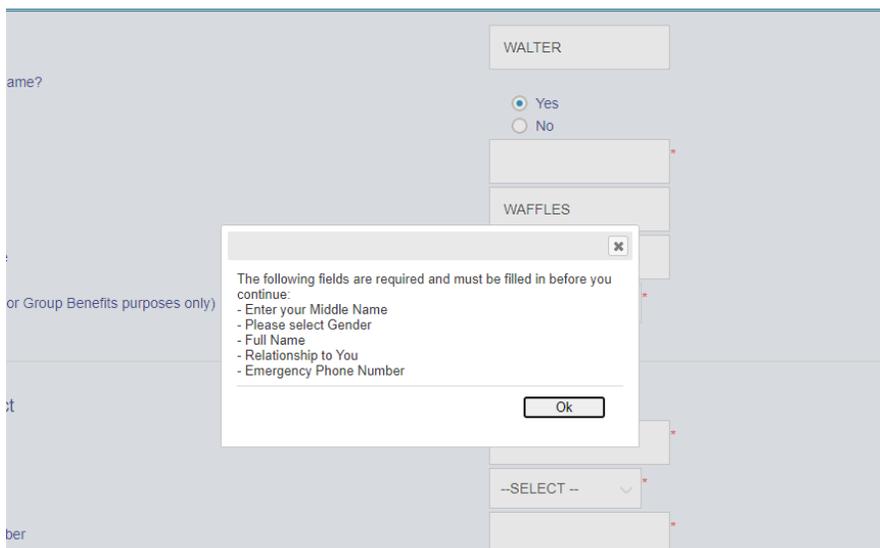
The following fields are required and must be filled in before you continue:

- Enter your Middle Name
- Please select Gender
- Full Name
- Relationship to You
- Emergency Phone Number

The dialog box has an "Ok" button at the bottom. The background form includes fields with the text "WALTER", "WAFFLES", and "--SELECT --".

You cannot move forward to the next panel until all required fields are complete.

Note: when you click Next, if any information is not complete, you will receive an error prompt, indicating which information is missing.



This screenshot is identical to the one above, showing the same form and modal dialog box with the list of required fields: Middle Name, Gender, Full Name, Relationship to You, and Emergency Phone Number.

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Where you are required to provide a document, click on the **Browse** button

Important: Please check to make sure your files are legible (clear image, in focus, minimal shadows, text can be read)

Payroll Information (WALTER WAFFLES)
New Employee Step

Please complete the sections below to be set up for direct deposit.

Enter your Social Insurance Number (no hyphens)

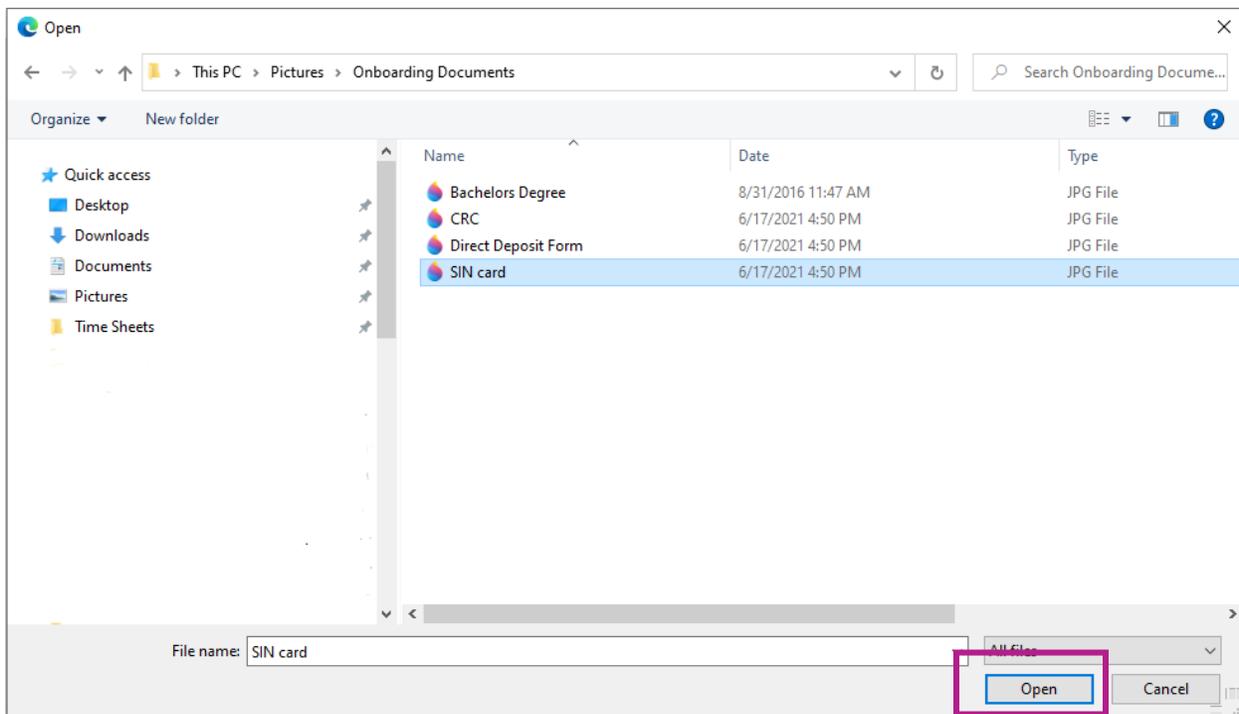
111222333

Please upload proof of your SIN Number, a copy (or photo) can be uploaded by clicking 'Browse' followed by Upload. Proof must include a document or card with all 9 digits of the number visible (SIN Card, CRA, Service Canada documents accepted).

Upload

Browse...

Find your document, select the file and press **Open**



Your file is now selected

You then need to click **Upload**

Payroll Information (WALTER WAFFLES)
New Employee Step

Please complete the sections below to be set up for direct deposit.

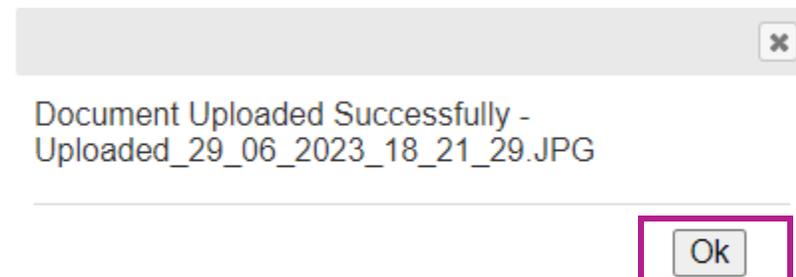
Enter your Social Insurance Number (no hyphens)

111222333

Please upload proof of your SIN Number, a copy (or photo) can be uploaded by clicking 'Browse' followed by Upload. Proof must include a document or card with all 9 digits of the number visible (SIN Card, CRA, Service Canada documents accepted).

C:\fakepath\SIN car Browse... Upload

You will receive a message to confirm your file was uploaded successfully. Click OK



You will now see a system-generated name for your file under the field

Enter your Social Insurance Number (no hyphens)

111222333

Please upload proof of your SIN Number, a copy (or photo) can be uploaded by clicking 'Browse' followed by Upload. Proof must include a document or card with all 9 digits of the number visible (SIN Card, CRA, Service Canada documents accepted).

Browse... Upload

Uploaded_29_06_2023_18_21_29.JPG X

If you need to submit more than one document to a section, select Browse and repeat steps to upload additional documents.,

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If you need to delete an uploaded file, click the red X

Enter your Social Insurance Number (no hyphens)

Please upload proof of your SIN Number, a copy (or photo) can be uploaded by clicking 'Browse' followed by Upload. Proof must include a document or card with all 9 digits of the number visible (SIN Card, CRA, Service Canada documents accepted).

Uploaded_29_06_2023_18_21_29.JPG

[Click here to delete 'Uploaded_29_06_2023_18_21_29.JPG'](#)

The system will ask for you to confirm if you want to delete this file from your module

Enter your Social Insurance Number (no hyphens)

Please upload proof of your SIN Number, a copy (or photo) can be uploaded by clicking 'Browse' followed by Upload. Proof must include a document or card with all 9 digits of the number visible (SIN Card, CRA, Service Canada documents accepted).

Are you sure to delete following file(s):
'Uploaded_29_06_2023_18_21_29.JPG'

Enter your Date of Birth

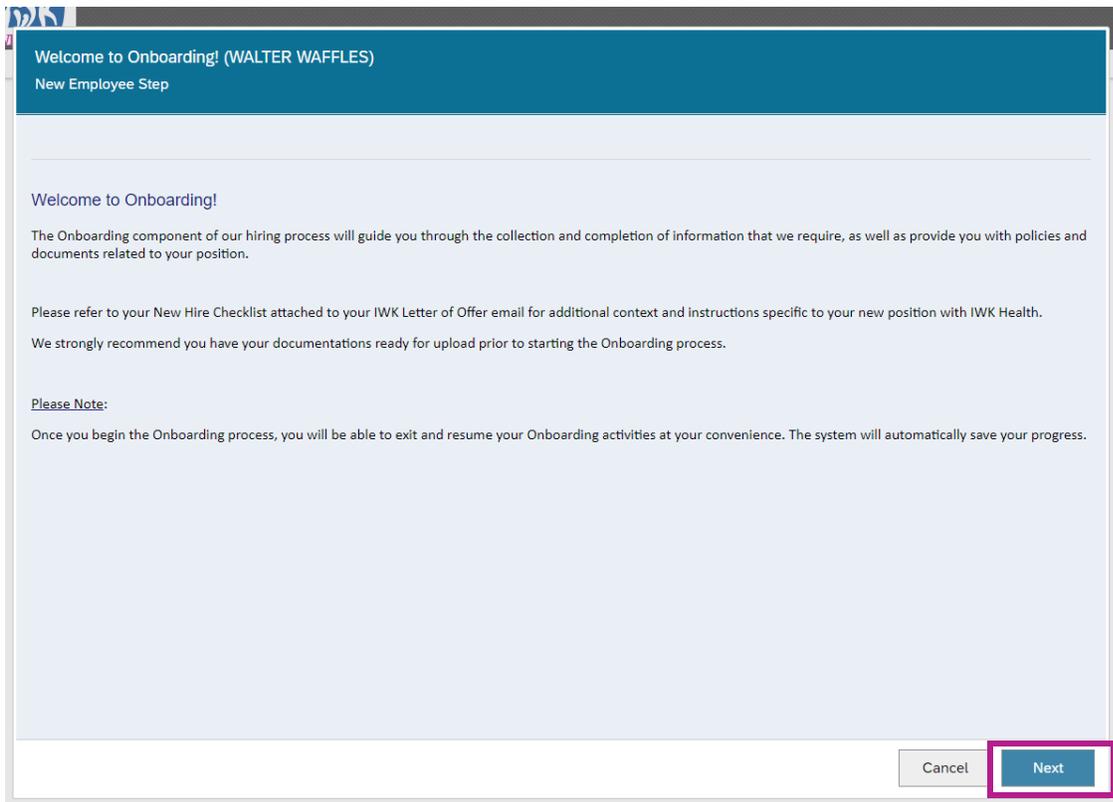
Welcome to Onboarding

This first panel provides an explanation of the steps that are part of the Onboarding process.

- It is encouraged you have all your documentation ready to upload prior to starting onboarding.

Note: Once started, the onboarding process can be returned to at your convenience. The system will save your progress as you complete panels.

Click **Next** to continue to the next panel



If you need additional support, please contact onboarding@iwk.nshealth.ca

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Panel: Employee Personal Information

Employee Personal Information (WALTER WAFFLES)

New Employee Step

Legal First Name	WALTER
Do you have a Middle Name?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Middle Name	
Legal Last Name	WAFFLES
Chosen/Preferred Name	
Sex Assigned at Birth (For Group Benefits purposes only)	--SELECT --

Emergency Contact

Full Name	
Relationship to You	--SELECT --
Emergency Phone Number	
Other Phone	

Cancel Back Next

Please review your Legal First Name and Legal Last Name and make corrections if required. If you have a chosen name that is different than your Legal First Name, please complete the Chosen/Preferred Name field.

All other fields are required

Panel: Payroll Information

Payroll Information (WALTER WAFFLES)
New Employee Step

Please complete the sections below to be set up for direct deposit.

Enter your Social Insurance Number (no hyphens)

Please upload proof of your SIN Number, a copy (or photo) can be uploaded by clicking 'Browse' followed by Upload. Proof must include a document or card with all 9 digits of the number visible (SIN Card, CRA, Service Canada documents accepted).

Enter your Date of Birth

Please upload proof of your date of birth, a copy (or photo) can be uploaded by clicking 'Browse' followed by Upload. Proof must be a valid government ID, such as Birth Certificate, Driver's License, Passport.

The banking information provided here will be considered authorization to use for direct deposit. Please complete the direct deposit information and upload a void cheque or direct deposit form from your banking institution.

Bank Country

Click **Browse** to find and select the file, followed by **Upload** to save the file to the module.

Social Insurance Number (SIN): Type the number and attach supporting documentation

All 9 digits of the number visible, must contain your full name

Acceptable documents include SIN Card, T4, CRA issued Notice of Assessment, SIN confirmation letter from Service Canada

You can apply for a SIN confirmation letter through [Service Canada](#)

If submitting a T4, Notice of Assessment or other sensitive document, you may wish to redact (cover/strikethrough) personal information such as income amounts.

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Date of Birth: Select date from calendar and attach supporting documentation

Click the year and scroll to find your birth year

Acceptable documents include Birth Certificate, Driver's License, or Passport.

Payroll Information (WALTER WAFFLES)
New Employee Step

Please complete the sections below to be set up for direct deposit.

Feb 2023

Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

MM/dd/yyyy

Please upload proof of your date of birth, a copy (or photo) can be uploaded by clicking 'Browse' followed by Upload. Proof must be a valid government ID, such as Birth Certificate, Driver's License, Passport.

Canada

Cancel Back Next

Feb 1980

Su	Mo	Tu	We	Th	Fr	Sa
3	4	5	6			
10	11	12	13			
17	18	19	20			
24	25	26	27			

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Account Number

Please upload a scanned copy of the image of void check

IWK Health

Payroll Information (WALTER WAFFLES)

New Employee Step

The banking information provided here will be considered authorization to use for direct deposit. Please complete the direct deposit information and upload a void cheque or direct deposit form from your banking institution.

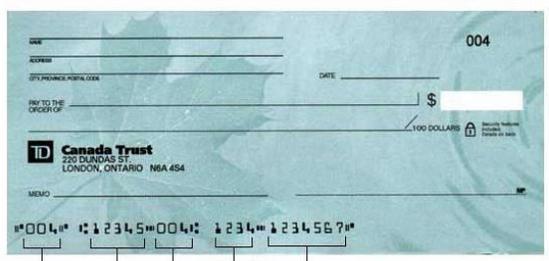
Bank Country:

Transit Number:

Institution Number:

Account Number:

Please upload a scanned copy or an image of void cheque or direct deposit form here



Direct Deposit/Banking Information: Type your account number and attach supporting documentation

Note: The banking information provided here will be considered authorization to use for direct deposit

All digits must be legible; document must contain your name

Acceptable documentation: VOID cheque, direct deposit form

Most financial institutions have an option to download a direct deposit form from their online banking portal.

We are not able to accept hand-written banking information unless it is counter-stamped by your bank

Panel: Permanent Address

Permanent Address (WALTER WAFFLES)
New Employee Step

Please enter all data in CAPITAL LETTERS.
If you have an apartment number, please include in the Street and House No. field.

Address

Street and House No.	12 MAPLE SYRUP LAN
2nd Address Line	
City	BEDFORD
Country	CANADA
Province/State	NOVA SCOTIA
Postal Code/Zip	B3Z 2P2

Phones

Primary Phone

Primary Phone (### ### ####)	9022222222
------------------------------	------------

Other Phone / Cell

Cancel Back

Please enter all the required information in ALL CAPS.

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Panel: Foreign Nationals Information

Note: This section applies to Foreign Nationals only
Canadian Citizens and Permanent Residents can skip to the Next panel

Foreign Nationals Information (WALTER WAFFLES)
New Employee Step

Please provide documentation to verify authorization to work in Canada. This section does not apply to Canadian Citizens and Permanent Residents.

Country: CANADA

Immigration Status: No Selection

Document Title: [Text Field]

Document Number: [Text Field]

Issue Date: MM/dd/yyyy

Expiration Date: MM/dd/yyyy

Country of Citizenship: AFGHANISTAN

Do You Have Valid Provincial Health Coverage?: Please Select

Please upload the following documents that are applicable to you. You will click 'Browse' followed by 'Upload'.

Work Permit (includes Co-op and Post Graduate Work Permit): [Browse...] [Upload]

Study Permit: [Browse...]

Cancel Back Next

Complete text fields and upload applicable documents

Example: a student would submit Study Permit and Proof of University enrollment

Be sure to scroll to the bottom of the panel to view all of the fields.

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Foreign Nationals Information (WALTER WAFFLES)

New Employee Step

Do You Have Valid Provincial Health Coverage? Please Select

Please upload the following documents that are applicable to you. You will click 'Browse' followed by 'Upload'.

Work Permit (includes Co-op and Post Graduate Work Permit)	<input type="text"/>	<input type="button" value="Browse..."/>
	<input type="button" value="Upload"/>	
Study Permit	<input type="text"/>	<input type="button" value="Browse..."/>
	<input type="button" value="Upload"/>	
Passport (Photo/Signature Page)	<input type="text"/>	<input type="button" value="Browse..."/>
	<input type="button" value="Upload"/>	
Immigration Medical Exam (most recent IME report)	<input type="text"/>	<input type="button" value="Browse..."/>
	<input type="button" value="Upload"/>	

Proof of Maintained Status Document	<input type="text"/>	<input type="button" value="Browse..."/>
	<input type="button" value="Upload"/>	
Proof of University / College enrollment, latest letter (if applicable, i.e., on study permit)	<input type="text"/>	<input type="button" value="Browse..."/>
	<input type="button" value="Upload"/>	

Panel: TD1 Federal Tax Form

(WALTER WAFFLES)
New Employee Step

The next number of panels will guide you through your TD1 Federal Tax Form and your TD1 Nova Scotia Form.

You will need to keep track of any amounts you claim in order to enter the total claim amount on line 13 of each form. We encourage you to view the full forms before, or at the same time, that you complete this section.

Please visit [Canada Revenue Agency](#) to view the TD1 Federal form and TD1 Nova Scotia form, access worksheets or find additional resources to help complete the form to best reflect your personal situation.

You will have the opportunity to review and edit both of your TD1 forms before you submit your full onboarding package.

Should you require updates to your claim amounts at any time throughout your employment with IWK, please contact our payroll department.

The following panels will guide you through your TD1 Federal Tax Form and your TD1 Nova Scotia Form. If you need assistance with completing these tax forms, please contact CRA (Canadian Revenue Agency) at 1-800-959-8281.

The fields from these forms are split over several separate panels, which can be confusing.

You will need to keep track of any amounts you claim in order to enter the total claim amount on line 13 of each form. We encourage you to view the full forms before, or at the same time, that you complete this section.

Note: Please visit [Canada Revenue Agency Website](#) to view the TD1 Federal form and TD1 Nova Scotia form, access worksheets or find additional resources to help complete the form to best reflect your personal situation.

You will have the opportunity to review and edit both of your TD1 forms before you submit your full onboarding package.

Should you require updates to your claim amounts at any time throughout your employment with IWK, please submit new forms directly to our Payroll department.



TD1 Personal Tax Credits Returns

Topics

[TD1 forms for 2024 for pay received on January 1, 2024 or later](#)

[TD1 forms for 2023 for pay received on January 1, 2023 or later](#)

The following images are of each panel within the tax form section of the online module

Again, we highly recommend you visit the CRA website to view each form (front and back) to help you complete these fields.

As you make selections, you may reduce the number of panels that apply to you.

Canada Personal Tax Credits Return Form TD1 (WALTER WAFFLES)

New Employee Step

Filling out Form TD1

Fill out this form **only** if any of the following apply:

- you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration
- you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed)
- you want to claim the deduction for living in a prescribed zone
- you want to increase the amount of tax deducted at source

Sign and date it, and give it to your employer or payer.

More than one employer or payer at the same time

If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1 for 2023, you **cannot** claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1, check this box, enter "0" on Line 13 and do not fill in Lines 2 to 12.

Total income is less than the total claim amount

Tick this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on line 13. Your employer or payer will not deduct tax from your earnings.

Cancel

Back

Next

Canada Personal Tax Credits Return Form TD1 (WALTER WAFFLES)
New Employee Step

Non-residents (Only fill in if you are a non-resident of Canada.)

As a non-resident of Canada, will 90% or more of your world income be included in determining your taxable income earned in Canada in 2021?

Yes (Fill out the subsequent panels)
 No (Enter "0" on line 13 on the subsequent panels and do not fill in lines 2 to 12 as you are not entitled to the personal tax credits.)

If you are unsure of your residency status, call the international tax and non-resident enquiries line at **1-800-959-8281**.

For non-residents only - Country of permanent residence. -- SELECT --

Cancel Back Next

Canada Personal Tax Credits Return Form TD1 (WALTER WAFFLES)

New Employee Step

1. Basic personal amount

Every resident of Canada can enter a basic personal amount of \$15,000. However, if your net income from all sources will be greater than \$165,430 and you enter \$15,000, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than \$165,430, you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the 2023 Personal Tax Credits Return, and enter the calculated amount here.

2. Canada caregiver amount for infirm children under age 18

Only one parent may claim \$2,499 for each infirm child born in 2006 or later who lives with both parents throughout the year. If the child does not live with both parents throughout the year, the parent who has the right to claim the "Amount for an eligible dependant" on line 8 may also claim the Canada caregiver amount for the child.

3. Age amount

If you will be 65 or older on December 31, 2023, and your net income for the year from all sources will be \$42,335 or less, enter \$8,396. You may enter a partial amount if your net income for the year will be between \$42,335 and \$98,309. To calculate a partial amount, fill out the line 3 section of Form TD1-WS.

4. Pension income amount

If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, old age security, or guaranteed income supplement payments), enter **whichever is less**: \$2,000 or your estimated annual pension income.

5. Tuition (full-time and part-time)

Fill in this section if you are a student at a university or college, or an educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees. Enter the total tuition fees that you will pay if you are a full-time or part-time student.

Cancel

Back

Next

Canada Personal Tax Credits Return Form TD1 (WALTER WAFFLES)

New Employee Step

6. Disability amount

If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$9,428.

7. Spouse or common-law partner amount

Enter the difference between the amount on line 1 (line 1 plus \$2,499 if your spouse or common-law partner is **infirm**) and your spouse's or common-law partner's estimated net income for the year if **both** of the following conditions apply:

- You are supporting your spouse or common-law partner who lives with you
- Your spouse or common-law partner's net income for the year will be less than the amount on line 1 (line 1 plus \$2,499 if your spouse or common-law partner is **infirm**)

In all cases, go to line 9 if your spouse or common-law partner is **infirm** and has a net income for the year of \$26,782 or less.

8. Amount for an eligible dependant

Enter the difference between the amount on line 1 (line 1 plus \$2,499 if your eligible dependant is **infirm**) and your eligible dependant's estimated net income for the year if **all** of the following conditions apply:

- You do **not** have a spouse or common-law partner, or you **have** a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- You are supporting the dependant who is related to you and lives with you
- The dependant's net income for the year will be less than the amount on line 1 (line 1 plus \$2,499 if your dependant is **infirm** and you cannot claim the **Canada caregiver amount for infirm children under 18 years of age** for this dependant)

In all cases, go to line 9 if your dependant is **18 years or older, infirm**, and has a net income for the year of \$26,782 or less.

9. Canada caregiver amount for eligible dependant or spouse or common-law partner

Fill out this section if, at any time in the year, you support an **infirm** eligible dependant (aged 18 or older) or an **infirm** spouse or common-law partner whose net income for the year will be \$26,782 or less. To calculate the amount you may enter here, fill out the line 9 section of Form TD1-WS.

Cancel

Back

Next

Canada Personal Tax Credits Return Form TD1 (WALTER WAFFLES)

New Employee Step

10. Canada caregiver amount for dependant(s) age 18 or older

If, at any time in the year, you support an **infirm** dependant age 18 or older (**other than** the spouse or common-law partner or eligible dependant you claimed an amount for on line 9 or could have claimed an amount for if their net income were under \$17,499) whose net income for the year will be \$18,783 or less, enter \$7,999. You may enter a partial amount if their net income for the year will be between \$18,783 and \$26,782. To calculate a partial amount, fill out the line 10 section of Form TD1-W.S. This worksheet may also be used to calculate your part of the amount if you are sharing it with another caregiver who supports the same dependant. You may claim this amount for more than one infirm dependant age 18 or older.

11. Amounts transferred from your spouse or common-law partner

If your spouse or common-law partner will not use all of their age amount, pension income amount, tuition amount, or disability amount on their income tax and benefit return, enter the unused amount.

12. Amounts transferred from a dependant

If your dependant will not use all of their disability amount on their income tax and benefit return, enter the unused amount. If your or your spouse's or common-law partner's dependent child or grandchild will not use all of their tuition amount on their income tax and benefit return, enter the unused amount.

13. TOTAL CLAIM AMOUNT – Add Lines 1 to 12.

Your employer or payer will use this amount to determine the amount of your tax deductions.

Cancel

Back

Next

Canada Personal Tax Credits Return Form TD1 (WALTER WAFFLES)

New Employee Step

Provincial or territorial personal tax credits return

You also have to fill out a provincial or territorial TD1 form if your claim amount on line 13 is more than \$15,000. Use the Form TD1 for your province or territory of **employment** if you are an employee. Use the Form TD1 for your province or territory of **residence** if you are a pensioner. Your employer or payer will use both this federal form and your most recent provincial or territorial Form TD1 to determine the amount of your tax deductions.

Your employer or payer will deduct provincial or territorial taxes after allowing the provincial or territorial basic personal amount if you are claiming the basic personal amount **only**.

Note: You may be able to claim the child amount on Form TD1SK, 2023 Saskatchewan Personal Tax Credits Return if you are a Saskatchewan resident supporting children under 18 at any time during 2023. Therefore, you may want to fill out Form TD1SK even if you are **only** claiming the basic personal amount on this form.

Cancel

Back

Next

Canada Personal Tax Credits Return Form TD1 (WALTER WAFFLES)
New Employee Step

Deduction for living in a prescribed zone

You may claim **any** of the following amounts if you live in the Northwest Territories, Nunavut, Yukon, or another prescribed **northern** zone for more than six months in a row beginning or ending in 2023:

- \$11.00 for each day that you live in the prescribed northern zone
- \$22.00 for each day that you live in the prescribed northern zone if, during that time, you live in a dwelling that you maintain, and you are the only person living in that dwelling who is claiming this deduction

Employees living in a prescribed **intermediate** zone may claim 50% of the total of the above amounts.
For more information, go to canada.ca/taxes-northern-residents.

Cancel Back Next

Canada Personal Tax Credits Return Form TD1 (WALTER WAFFLES)
New Employee Step

Additional tax to be deducted

You may want to have more tax deducted from each payment if you receive other income such as non-employment income from CPP or QPP benefits, or old age security pension. You may have less tax to pay when you file your income tax and benefit return by doing this. Enter the additional tax amount you want deducted from each payment to choose this option. You may fill out a new Form TD1 to change this deduction later.

Reduction in tax deductions

You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

Cancel Back Next

If you wish to have additional taxes withheld, please enter a dollar amount of the additional tax you would like withheld per pay cheque.

You can adjust this amount, and all other amounts on your tax forms at any time during your employment by submitting revised forms to Payroll.

You have now completed your Federal TD1 tax form

The next panels will be for your Provincial TD1 NS tax form

Many of the fields are similar to those you completed on the Federal form

Do read the instructions in detail as the claim amounts may not be the same.

Nova Scotia Personal Tax Credits Return Form TD1NS (WALTER WAFFLES)

New Employee Step

Filling out the Form TD1NS

Fill out this form if you have taxable income in Nova Scotia and **any** of the following apply:

- you have a new employer or payer, and you will receive salary, wages, commissions, pensions, employment insurance benefits, or any other remuneration
- you want to change the amounts you previously claimed (for example, the number of your eligible dependants has changed)
- you want to increase the amount of tax deducted at source

Sign and date it, and give it to your employer or payer.

If you do not fill out Form TD1NS, your employer or payer will deduct taxes after allowing the basic personal amount **only**.

More than one employer or payer at the same time

If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1NS for 2023, you **cannot** claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1NS, check this box, enter "0" on line 12 and do not fill in lines 2 to 11.

Cancel

Back

Next

Nova Scotia Personal Tax Credits Return Form TD1NS (WALTER WAFFLES)

New Employee Step

1. Basic personal amount

Every person employed in Nova Scotia and every pensioner residing in Nova Scotia can claim the basic personal amount. If your taxable income from all sources for the year will be \$25,000 or less enter \$11,481, comprising the basic amount of \$8,481 and the additional amount of \$3,000, and if it is more than \$75,000 enter \$8,481. If your taxable income will be between \$25,000 and \$75,000 and you want to calculate a partial claim for the \$3,000 additional amount, get Form TD1NS-WS, Worksheet for the 2023 Nova Scotia Personal Tax Credits Return, and fill in the appropriate section. If you will have more than one employer or payer at the same time in 2023, see "More than one employer or payer at the same time" on page 2.

2. Age amount

If you will be 65 or older on December 31, 2023, and your net income from all sources will be \$30,828 or less, enter \$4,141. You may enter a partial amount if your net income for the year will be between \$30,828 and \$58,435. To calculate a partial amount, fill out the line 2 section of Form TD1NS-WS.

2.1 Age amount supplement

If you will be 65 or older on December 31, 2023, and your taxable income from all sources will be \$25,000 or less, enter \$1,465. You may enter a partial amount if your taxable income for the year will be between \$25,000 and \$75,000. To calculate a partial amount, fill out the line 2.1 section of Form TD1NS-WS.

3. Pension income amount

If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, old age security, or guaranteed income supplement payments), enter **whichever is less:** \$1,173 or your estimated annual pension.

4. Tuition and education amounts (full-time and part-time)

Fill out this section if you are a student at a university, college, or educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees. Enter your total tuition fees that you will pay, **plus** the amount from the following conditions that apply:

- \$200 for each month you will be a full-time student
- \$200 for each month you will be a part-time student who has a mental or physical disability
- \$60 for each month you will be a part-time student who does not have a mental or physical disability

5. Disability amount

Cancel

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Next

Nova Scotia Personal Tax Credits Return Form TD1NS (WALTER WAFFLES)

New Employee Step

6. Spouse or common-law partner amount

Enter \$8,481 if you are supporting your spouse or common-law partner and **both** of the following conditions apply:

- Your spouse or common-law partner lives with you
- Your spouse's or common-law partner's net income for the year will be \$848 or less

You may enter a partial amount if your spouse's or common-law partner's net income will be between \$848 and \$9,329. To calculate a partial amount, fill out the line 6 section of Form TD1NS-WS.

6.1. Spouse or common-law partner supplement

Enter the difference between \$3,000 and the estimated net income of your spouse or common-law partner if **both** of the following conditions apply:

- You are supporting your spouse or common-law partner who lives with you
- Your taxable income from **all** sources will be \$25,000 or less

You may enter a partial amount if your taxable income from **all** sources will be between \$25,000 and \$75,000 and your spouse's or common-law partner's net income will be under \$3,000. To calculate a partial amount, fill out the line 6.1 section of Form TD1NS-WS.

7. Amount for an eligible dependant

Enter \$8,481 if you are supporting an eligible dependant and **all** of the following conditions apply:

- You do **not** have a spouse or common-law partner, or you have a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- The dependant is related to you and lives with you
- The dependant has a net income of \$848 or less for the year

You may enter a partial amount if the eligible dependant's net income for the year will be between \$848 and \$9,329. To calculate a partial amount, fill out the line 7 section of Form TD1NS-WS.

7.1. Amount for an eligible dependant supplement

Enter the difference between \$3,000 and the estimated net income of your eligible dependant if **all** of the following conditions apply:

- You do **not** have a spouse or common-law partner, or you have a spouse or common-law partner who does not live with you and who you are not supporting or being supported by
- The dependant is related to you and lives with you
- Your taxable income from **all** sources will be \$25,000 or less for the year

You may enter a partial amount if your taxable income from **all** sources will be between \$25,000 and \$75,000 and your eligible dependant's net income will be under \$3,000. To calculate a partial amount, fill out the line 7.1 section of Form TD1NS-WS.

8. Caregiver amount

Cancel Back Next

8. Caregiver amount

Enter \$4,898 if you are taking care of a dependant and **all** of the following conditions apply:

- The dependant is your or your spouse's or common-law partner's parent or grandparent (aged 65 or older) or an infirm relative (aged 18 or older)
- The dependant lives with you
- The dependant has a net income of \$13,677 or less for the year

You may enter a partial amount if the dependant's net income for the year will be between \$13,677 and \$18,575. To calculate a partial amount, fill out the line 8 section of Form TD1NS-WS.

9. Amount for infirm dependants age 18 or older

Enter \$2,798 if you are supporting an infirm dependant and **all** of the following conditions apply:

- The dependant lives in Canada and is related to you or your spouse or common-law partner
- The dependant is 18 years or older
- The dependant has a net income of \$5,683 or less for the year

You may enter a partial amount if the dependant's net income for the year will be between \$5,683 and \$8,481. To calculate a partial amount, fill out the line 9 section of TD1NS-WS. You **cannot** claim an amount for a dependant you claimed on line 8.

10. Amounts transferred from your spouse or common-law partner

If your spouse or common-law partner will not use all of their age amount, pension income amount, tuition and education amounts, or disability amount on their income tax and benefit return, enter the unused amount.

Cancel Back Next

Nova Scotia Personal Tax Credits Return Form TD1NS (WALTER WAFFLES)
New Employee Step

11. Amounts transferred from a dependant

If your dependant will not use all of their disability amount on their income tax and benefit return, enter the unused amount. If your or your spouse's or common-law partner's dependent child or grandchild will not use all of their tuition and education amounts on their income tax and benefit return, enter the unused amount.

12. TOTAL CLAIM AMOUNT – Add lines 1 to 11.

Your employer or payer will use this amount to determine the amount of your provincial tax deductions.

Cancel

Back

Next

Nova Scotia Personal Tax Credits Return Form TD1NS (WALTER WAFFLES)

New Employee Step

Total income is less than the total claim amount

Tick this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on line 12. Then your employer or payer will not deduct tax from your earnings.

Additional tax to be deducted

If you want to have more tax deducted at source, fill out section "Additional tax to be deducted" on the federal Form TD1.

Reduction in tax deductions

You may ask to have less tax deducted at source if you are eligible for deductions or non-refundable tax credits that are not listed on this form (for example, periodic contributions to a registered retirement savings plan (RRSP), child care or employment expenses, charitable donations, and tuition and education amounts carried forward from the previous year). To make this request, fill out Form T1213, Request to Reduce Tax Deductions at Source, to get a letter of authority from your tax services office. Give the letter of authority to your employer or payer. You do not need a letter of authority if your employer deducts RRSP contributions from your salary.

Cancel

Back

Next

Panel: Required Documents

Required Documents (WALTER WAFFLES)
New Employee Step

Please upload documents as requested in the appropriate section below. If you have questions about the documentation you are required to provide, please refer to your new Hire checklist.

Proof of Education

Browse...
Upload

Proof of Registration/Licensure

Browse...
Upload

Proof of Certifications (i.e Basic life Support, Non-Violent Crisis Intervention, Food Handlers)

Browse...
Upload

Cancel Back Next

The following pages contain instruction and information on all possible documentation we may require for a variety of positions. Please refer to your New Hire Checklist to confirm which documents you are required to submit for your specific position.

Uploaded files must be clear images, in-focus, minimal shadows, legible text

Proof of Education: diploma, degree, transcript, or letter from an educational institution confirming completion of program of study

If your position has multiple education requirements, upload each document separately. You can add multiple documents per field.

Proof of Registration/Licensure: image of your registration or licensure documentation

Proof of Certifications: image of CPR, WHMIS, NVC

The Heart & Stroke Foundation Basic Life Support is the ONLY BLS supported by the IWK.

Please speak with your manager or clinical leader if you have not completed BLS through Health & Stroke Foundation.

IWK Onboarding Guide

Required Documents (WALTER WAFFLES)
New Employee Step

Upload

Proof of Certifications (i.e Basic life Support, Non-Violent Crisis Intervention, Food Handlers) Browse...

Criminal Record Check and Vulnerable Sector Search (if required for your position) Browse...

Upload

CRC and VSS

Signed Letter of Offer

Cancel Back Next

The following fields are required and must be filled in before you continue:
- Criminal record Check is a required document.
- Signed Letter of Offer is a required document.

Ok

Criminal Record Check/Vulnerable Sector Search:

If you have not received your results, please upload either a picture or screenshot of a payment receipt or confirmation of request. This will allow you to continue and complete the module. Your CRC and VSS (if required), can be submitted by email to onboarding@iwk.nshealth.ca once received.

IWK Onboarding Guide

Required Documents (WALTER WAFFLES)
New Employee Step

Criminal Record Check and Vulnerable Sector Search (if required for your position)

Browse...

Upload

CRC and VSS

Signed Letter of Offer

Browse...

Upload

Proof of Nursing Experience for Placement on Salary Scale

Browse...

Upload

Cancel Back **Next**

Signed Letter of Offer:

You must submit **ALL pages** of the letter of offer

If you are submitting photos of your letter, we ask that you insert all of the photos into a single word or PDF document for upload

IWK Onboarding Guide

The screenshot displays a web interface titled "HR Forms (WALTER WAFFLES) New Employee Step". It contains three distinct sections for document uploads:

- NSNU Portability Form:** Includes a "Browse..." button and an "Upload" button.
- IWK and NSH Portability Agreement:** Includes a "Browse..." button and an "Upload" button.
- NSNU New Hire Premium Agreement:** Includes a "Browse..." button and an "Upload" button.

At the bottom right of the interface, there are three navigation buttons: "Cancel", "Back", and "Next".

NSNU Portability Form: If you are a current or former member of Nova Scotia Nurses' Union, please click on the text to download the portability form to determine if you may eligible to port any of your service and benefits. Your current or former employer will need to complete the portability form.

If you do not have this form completed at the time of your onboarding, you can submit to onboarding@iwk.nshealth.ca within 60 days of your hire date.

IWK and NSH Portability Agreement: If you are a former or current employee of Nova Scotia Health, click on the text to download the portability form to determine if you may be eligible to port you service and benefits. NSH will need to complete the portability form.

If you do not have this form completed at the time of your onboarding, you can submit to onboarding@iwk.nshealth.ca within 60 days of your hire date.

Nursing New Hire Premium Agreement: Click on the text to download a form explaining several pay premiums available to nurses. Please complete fields applicable to you and upload to the module.

Panel: IWK Foundation Casual Day/Payroll Donation Form

The screenshot shows a web interface for the 'IWK Foundation Casual Day/Payroll Donation Form (WALTER WAFFLES)'. The page is titled 'New Employee Step'. It contains a paragraph of instructions: 'Donations to the IWK Foundation directly support priority equipment and fund programs, research and new facilities at the IWK. Please print, complete and upload the form below if you wish to participate in Casual Day (check with your manager if your position allows for participation), or would like to make a bi-weekly donation directly from your pay.' Below this text is a link: 'IWK Foundation Casual Day/Payroll Donation Form'. There are two buttons: 'Browse...' and 'Upload'. At the bottom right, there are three buttons: 'Cancel', 'Back', and 'Next'.

OPTIONAL

Please print, complete and upload the form below if you wish to participate in Casual Day (check with your manager if your position allows for participation), or would like to make a bi-weekly donation directly from your pay.

Donations to the IWK Foundation directly support priority equipment and fund programs, research and new facilities at the IWK.

Panel: Child Abuse Registry

Child Abuse Registry (WALTER WAFFLES)
New Employee Step

Required for anyone who currently does or previously has lived in Nova Scotia.

If you have not already requested, please apply for your Child Abuse Registry check by visiting <https://beta.novascotia.ca/apply-child-abuse-register-search>. Please note that a valid, Government-issued ID such as a health card, driver's license, passport, or status card are required in order to complete the Child Abuse Registry Check process.

Even if your current position is not in direct patient care, there may be times where you will have contact with your patient population. Please select YES when prompted "Will you have contact with children under age 19 as part of your job or volunteer work?"

Your results will be mailed directly to you in upcoming weeks. Please share a copy with onboarding@iwk.nshealth.ca

Child Abuse Registry Results (if available)

[Show Onboarding 1.0 version information](#)

Required for anyone who currently does or previously has lived in Nova Scotia.

If you have not already requested, please apply for your Child Abuse Registry check by visiting <https://beta.novascotia.ca/apply-child-abuse-register-search>. Please note that a valid, Government-issued ID such as a health card, driver's license, passport, or status card are required in order to complete the Child Abuse Registry Check process.

Even if your current position is not in direct patient care, there may be times where you will have contact with your patient population. Please select YES when prompted "Will you have contact with children under age 19 as part of your job or volunteer work?"

Your results will be mailed directly to you in upcoming weeks.

Please share a copy with onboarding@iwk.nshealth.ca

IWK Onboarding Guide

Panel: Corporate Policies

Corporate Policies (WALTER WAFFLES)
New Employee Step

We have a number of Centre-wide policies that speak to our culture and our goal of creating an environment in which employees learn, feel safe and know that they are providing the best service possible for our patients families. Please click on each link and read each document. This is a required step.

[Introduction to IWK Health Centre Polices](#)
[Relocation Policy](#)
[NSNU Uniform Policy](#)
[Conditional Registration and Licensure for Nurses](#)
[IWK Code of Conduct](#)

I have reviewed, understand, and agree to adhere to above policies and procedures. Yes

IMPORTANT!
In the final steps of this module, you will be asked to sign a form acknowledging that you have reviewed, understand and agree to adhere to these policies and procedures.
You may wish to save these documents for future reference

IWK policies that apply to you and your position are presented on this panel.

You may have a long list or a short list, depending on your position.

Please click the blue text to review each policy

IMPORTANT!

In the final steps of this module, you will be asked to sign a form acknowledging that you have reviewed, understand and agree to adhere to these policies and procedures.

You may wish to save these documents for future reference

Tick the box to acknowledge you have reviewed, understand and agree to adhere to the policies

Review and Approve

My Profile

Review and Approve - New Employee Step Next >>

Please review the data you have entered. If any information is incorrect simply click on the incorrect data. A wizard screen will pop-up where you can correct the data. Once corrected, click 'Finish' on the pop-up to return to the Review and Approval page.

Permanent Address

Address

Street and House No.	12 MAPLE SYRUP LANE	2nd Address Line	_____
City	BEDFORD	Country	BD
Province/State	BG004	Postal Code/Zip	B3Z 2P2

Phones

Primary Phone (### ### ####) 9022222222

Other Phone (### ### ####) _____

Close Next >>

You have completed all the fields within the onboarding module. Please review this information to ensure it is correct

To make corrections, click the blue text you wish you edit

See the example below to edit your primary phone number

Please review the data you have entered. If any information is incorrect simply click on the incorrect data. A wizard screen will pop-up where you can correct the data. Once corrected, click 'Finish' on the pop-up to return to the Review and Approval page.

Permanent Address

Address

Street and House No.	12 MAPLE SYRUP LANE	2nd Address Line	_____
City	BEDFORD	Country	CA
Province/State	NS	Postal Code/Zip	B3Z 2P2

Phones

Primary Phone (### ### ####) 9022222222

Other Phone (### ### ####) _____

Press the Enter key to edit "Primary Phone (### ### ####)"

IWK Onboarding Guide

This will bring you back to the Permanent Address panel

Edit the field, then click **Finish**

Permanent Address (WALTER WAFFLES)
New Employee Step

Please enter all data in CAPITAL LETTERS.
If you have an apartment number, please include in the Street and House No. field.

Address

Street and House No.	12 MAPLE SYRUP LAN
2nd Address Line	
City	BEDFORD
Country	CANADA
Province/State	NOVA SCOTIA
Postal Code/Zip	B3Z 2P2

Phones

Primary Phone

Primary Phone (### ### ####)	9025555555
------------------------------	------------

Other Phone / Cell

[Show Onboarding 1.0 version information](#)

Finish

This will take you back to the review and approve screen

IWK Onboarding Guide

Once you are satisfied with the information, click **Next** to continue

Review and Approve - New Employee Step Next >>

Please review the data you have entered. If any information is incorrect simply click on the incorrect data. A wizard screen will pop-up where you can correct the data. Once corrected, click 'Finish' on the pop-up to return to the Review and Approval page.

Permanent Address

Address

Street and House No.	12 MAPLE SYRUP LANE	2nd Address Line	_____
City	BEDFORD	Country	CA
Province/State	NS	Postal Code/Zip	B3Z 2P2

Phones

Primary Phone (### ### ####) 9025555555

Other Phone (### ### ####) _____

Close Next >>

Review each panel and click **Next** to continue

My Profile

Review and Approve - New Employee Step << Back Next >>

Please review the data you have entered. If any information is incorrect simply click on the incorrect data. A wizard screen will pop-up where you can correct the data. Once corrected, click 'Finish' on the pop-up to return to the Review and Approval page.

Canada Personal Tax Credits Return Form TD1

Filling out Form TD1

More than one employer or payer at the same time

If you have more than one employer or payer at the same time and you have already claimed personal tax credit amounts on another Form TD1 for 2023, you **cannot** claim them again. If your total income from all sources will be more than the personal tax credits you claimed on another Form TD1, check this box, enter "0" on Line 13 and do not fill in Lines 2 to 12. No

Total income is less than the total claim amount

Tick this box if your total income for the year from **all** employers and payers will be **less** than your total claim amount on line 13. Your employer or payer will not deduct tax from your earnings. No

Close << Back Next >>

IWK Onboarding Guide

Review and Approve - New Employee Step << Back Next >>

Please review the data you have entered. If any information is incorrect simply click on the incorrect data. A wizard screen will pop-up where you can correct the data. Once corrected, click 'Finish' on the pop-up to return to the Review and Approval page.

Required Documents

Proof of Education Uploads: [Click here to review uploaded files](#)

Proof of Registration/Licensure Uploads: [Click here to review uploaded files](#)

Proof of Certifications (i.e Basic life Support, Non-Violent Crisis Intervention, Food Handlers) Uploads: [Click here to review uploaded files](#)

Criminal Record Check and Vulnerable Sector Search (if required for your position) Uploads: [Click here to review uploaded files](#) [Uploaded_07_02_2023_16_15_15.JPG](#) CRC and VSS

Signed Letter of Offer Uploads: [Click here to review uploaded files](#) [Uploaded_07_02_2023_16_14_52.jpg](#)

Proof of Nursing Experience for Placement on Salary Scale Uploads: [Click here to review uploaded files](#)

HR Forms

NSNU Portability Form Uploads: [Click here to review uploaded files](#)

IWK and NSH Portability Agreement Uploads: [Click here to review uploaded files](#)

NSNU New Hire Premium Agreement Uploads: [Click here to review uploaded files](#)

Close << Back Next >>

Review and Approve - New Employee Step << Back Next >>

Please review the data you have entered. If any information is incorrect simply click on the incorrect data. A wizard screen will pop-up where you can correct the data. Once corrected, click 'Finish' on the pop-up to return to the Review and Approval page.

IWK Foundation Casual Day/Payroll Donation Form

IWK Foundation Casual Day/Payroll Donation Form Uploads: [Click here to review uploaded files](#)

Child Abuse Registry

Child Abuse Registry Request Uploads: [Click here to review uploaded files](#)

Copy of NS Driver's License or Health Card Uploads: [Click here to review uploaded files](#)

Close << Back Next >>

IWK Onboarding Guide

Review and Approve - New Employee Step << Back Finish

Please review the data you have entered. If any information is incorrect simply click on the incorrect data. A wizard screen will pop-up where you can correct the data. Once corrected, click 'Finish' on the pop-up to return to the Review and Approval page.

Corporate Policies

Introduction to IWK Health Centre Polices	Relocation Policy
NSNU Uniform Policy	Conditional Registration and Licensure for Nurses
IWK Code of Conduct	

I have reviewed, understand, and agree to adhere to above policies and procedures. Yes;

IMPORTANT!

Close << Back Finish

Click **Finish** to move forward with the final steps to sign and submit your information to onboarding

Click **Sign Forms** to start the final steps



You have completed the personal information and document upload section.

Click the "Sign Forms" button if you would like to sign the employee forms now.

Sign Forms

Electronic Signature Step



Welcome, WALTER WAFFLES

Electronic Signature Step for Walter Waffles

Welcome to the electronic signature step. At this step you will sign all of your paperwork. Please acknowledge your agreement to use electronic signature technology by clicking the agreement below.

Agreement to Use Electronic Click Signature to Sign Documents
 I, WALTER WAFFLES, agree to sign these electronic PDF documents using "click" signature technology. I understand that a record of each document and my signing of it will be stored in electronic code. I intend both the signature I inscribe with the "click" signature technology and the electronic record of it to be my legal signature to the document. I confirm that the document is "written" or "in writing" and that any accurate record of the document is an original of the document.

Enter the Password and its Confirmation (if required) and click "Submit". The list of documents you need to sign will be displayed. Click the "Click to Sign" button to place your electronic signature on the document. A check mark will appear next to the form you have electronically signed. Each form will be automatically presented for your review and signature.

User Name Password

Pin Code [Forgot Password](#)

Click the checkbox to agree to the conditions of creating and storing electronic record of the documents you are about to sign.

You will need to enter the password you created the first time you logged into your onboarding module to move forward with signing your forms.

If you have forgotten your password, contact onboarding@iwk.nshealth.ca for password re-set

This may take up to 3 business days to complete

Electronic Signature Step for Walter Waffles

Welcome to the electronic signature step. At this step you will sign all of your paperwork. Please acknowledge your agreement to use electronic signature technology by clicking the agreement below.

Agreement to Use Electronic Click Signature to Sign Documents
 I, WALTER WAFFLES, agree to sign these electronic PDF documents using "click" signature technology. I understand that a record of each document and my signing of it will be stored in electronic code. I intend both the signature I inscribe with the "click" signature technology and the electronic record of it to be my legal signature to the document. I confirm that the document is "written" or "in writing" and that any accurate record of the document is an original of the document.

Enter the Password and its Confirmation (if required) and click "Submit". The list of documents you need to sign will be displayed. Click the "Click to Sign" button to place your electronic signature on the document. A check mark will appear next to the form you have electronically signed. Each form will be automatically presented for your review and signature.

User Name Password

Pin Code [Forgot Password](#)

Click **Submit** to continue

This is your last chance to make revisions to your personal information and tax forms – please review carefully!

Employee's Forms Correct Data

Click to Sign

Click the "Click to Sign" button to e-sign your forms. The next form to sign will automatically appear and a check mark will appear by each signed form.

Personal Tax Credits Return 2023
 IWK_New Hire Form April 2016
 Nova Scotia Personal Tax Credits Return 2023
 IWK_Pledge of Confidentiality 2016-10-04
 IWK Policies Sign Off 2021

Need help signing your forms? [Click here for instructions.](#)

Canada Revenue Agency / Agence du revenu du Canada		Protected B when completed TD1	
2023 Personal Tax Credits Return			
Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions.			
Fill out this form based on the best estimate of your circumstances.			
If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.			
Last name WAFLES	First name and initial(s) WALTER	Date of birth (YYYY/MM/DD) 1980/02/10	Employee number
Address 12 MAPLE SYRUP LANE BEDFORD		Postal code B3Z2P2	For non-residents only Country of permanent residence
			Social insurance number 111222333
<p>1. Basic personal amount – Every resident of Canada can enter a basic personal amount of \$15,000. However, if your net income from all sources will be greater than \$165,430 and you enter \$15,000, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than \$165,430, you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the 2023 Personal Tax Credits Return, and enter the calculated amount here.</p>			
<p>2. Canada caregiver amount for infirm children under age 18 – Only one parent may claim \$2,499 for each infirm child born in 2006 or later who lives with both parents throughout the year. If the child does not live with both parents throughout the year, the parent who has the right to claim the "Amount for an eligible dependent" on line 8 may also claim the Canada caregiver amount for the child.</p>			
<p>3. Age amount – If you will be 65 or older on December 31, 2023, and your net income for the year from all sources will be \$42,335 or less, enter \$8,396. You may enter a partial amount if your net income for the year will be between \$42,335 and \$98,309. To calculate a partial amount, fill out the line 3 section of Form TD1-WS.</p>			
<p>4. Pension income amount – If you will receive regular pension payments from a pension plan or fund (not including Canada Pension Plan, Quebec Pension Plan, old age security, or guaranteed income supplement payments), enter whichever is less: \$2,000 or your estimated annual pension income.</p>			
<p>5. Tuition (full-time and part-time) – Fill in this section if you are a student at a university or college, or an educational institution certified by Employment and Social Development Canada, and you will pay more than \$100 per institution in tuition fees. Enter the total tuition fees that you will pay if you are a full-time or part-time student.</p>			
<p>6. Disability amount – If you will claim the disability amount on your income tax and benefit return by using Form T2201, Disability Tax Credit Certificate, enter \$9,428.</p>			
<p>7. Spouse or common-law partner amount – Enter the difference between the amount on line 1 (line 1 plus \$2,499 if your spouse or common-law partner is infirm) and your spouse's or common-law partner's estimated net income for the year if both of the following conditions apply:</p> <ul style="list-style-type: none"> You are supporting your spouse or common-law partner who lives with you Your spouse or common-law partner's net income for the year will be less than the amount on line 1 (line 1 plus \$2,499 if your spouse or common-law partner is infirm) 			
<p>In all cases, go to line 9 if your spouse or common-law partner is infirm and has a net income for the year of \$26,782 or less.</p>			
<p>8. Amount for an eligible dependent – Enter the difference between the amount on line 1 (line 1 plus \$2,499 if your eligible dependent is infirm) and your eligible dependent's estimated net income for the year if all of the following conditions apply:</p> <ul style="list-style-type: none"> You do not have a spouse or common-law partner, or you have a spouse or common-law partner who does not live with you and who you are not supporting or being supported by You are supporting the dependent who is related to you and lives with you The dependent's net income for the year will be less than the amount on line 1 (line 1 plus \$2,499 if your dependent is infirm and you cannot claim the Canada caregiver amount for infirm children under 18 years of age for this dependent) 			
<p>In all cases, go to line 9 if your dependent is 18 years or older, infirm, and has a net income for the year of \$26,782 or less.</p>			
<p>9. Canada caregiver amount for eligible dependent or spouse or common-law partner – Fill out this section if, at any time in the year, you support an infirm eligible dependent (aged 18 or older) or an infirm spouse or common-law partner whose net income for the year will be \$26,782 or less. To calculate the amount you may enter here, fill out the line 9 section of Form TD1-WS.</p>			
<p>10. Canada caregiver amount for dependant(s) age 18 or older – If, at any time in the year, you support an infirm dependent age 18 or older (other than the spouse or common-law partner or eligible dependent you claimed an amount for on line 9 or could have claimed an amount for if their net income were under \$17,459) whose net income for the year will be \$16,783 or less, enter \$7,999. You may enter a partial amount if their net income for the year will be between \$16,783 and \$26,782. To calculate a partial amount, fill out the line 10 section of Form TD1-WS. This worksheet may also be used to calculate your part of the amount if you are sharing it with another caregiver who supports the same dependent. You may claim this amount for more than one infirm dependent age 18 or older.</p>			

The right side of the page lists each form for your review and signature

The left side of the page displays the current form

To edit the information on the form in view, click **Correct Data**

Employee's Forms Correct Data

Click to Sign

Click the "Click to Sign" button to e-sign your forms. The next form to sign will automatically appear and a check mark will appear by each signed form.

- Personal Tax Credits Return 2023
- IWK_New Hire Form April 2016
- Nova Scotia Personal Tax Credits Return 2023
- IWK_Pledge of Confidentiality 2016-10-04
- IWK Policies Sign Off 2021

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If the form is correct, click **Click to Sign**

Employee's Forms Correct Data

Need help signing your forms? [Click here for instructions.](#)

Click to Sign

Click the "Click to Sign" button to e-sign your forms. The next form to sign will automatically appear and a check mark will appear by each signed form.

- ✓ Personal Tax Credits Return 2023
- IWK_New Hire Form April 2016
- Nova Scotia Personal Tax Credits Return 2023
- IWK_Pledge of Confidentiality 2016-10-04
- IWK Policies Sign Off 2021



New Hire Information

In order to generate your employee file, we require the following information. Please submit completed forms before your scheduled start date:

WAFFLES Last Name	WALTER First Name	 Middle Name
12 MAPLE SYRUP LANE Street Address		 Apartment/Unit
BEDFORD City	NS Province	B3Z 2P2 Postal Code
9022222222 Primary Phone Number	 Secondary Phone Number (Optional)	mymap@iwk.nshealth.ca Personal E-Mail Address (Optional)
111222333 Social Insurance Number	2/10/1980 Date of Birth (YYYY-MM-DD)	M Gender

Emergency Contact Information

 Last Name	PATTY PANCAKES First Name	 Gender
902-555-5555 Primary Phone Number	 Secondary Phone Number	SPOUSE Relationship

IWK Onboarding Guide

A green checkmark will display next to the title of the form in the left

The next form for your review will then display in the right panel

The screenshot displays a web interface for IWK onboarding. On the left, a sidebar titled "Employee's Forms/Correct Data" contains a list of forms with checkmarks: "Personal Tax Credits Return 2023", "IWK_New Hire Form April 2016", "Nova Scotia Personal Tax Credits Return 2023", "IWK_Pledge of Confidentiality 2016-10-04", and "IWK Policies Sign Off 2021". A "Click to Sign" button is highlighted with a red box. Above the list, instructions state: "Click the 'Click to Sign' button to e-sign your forms. The next form to sign will automatically appear and a check mark will appear by each signed form." At the top right, a red link reads "Need help signing your forms? Click here for instructions." The main content area shows the "Privacy of Information" document, featuring the IWK Health Centre logo and a scroll bar on the right side, which is also highlighted with a red box.

Employee's Forms/Correct Data

Click the "Click to Sign" button to e-sign your forms. The next form to sign will automatically appear and a check mark will appear by each signed form.

Need help signing your forms? [Click here for instructions.](#)

Click to Sign

✓ Personal Tax Credits Return 2023

✓ IWK_New Hire Form April 2016

✓ Nova Scotia Personal Tax Credits Return 2023

IWK_Pledge of Confidentiality 2016-10-04

IWK Policies Sign Off 2021

IWK Health Centre

Privacy of Information

The IWK Health Centre (IWK) must protect the patient privacy, and the confidential patient and business information in its control. All IWK and associates¹ are responsible for keeping confidential all patient and business information that they learn about, hear, handle or view in the course of work at the IWK.

All information about patient, family, and/or staff members must be treated as confidential. Even disclosing that someone is a patient at the IWK is considered a violation of confidentiality. Discussions about patient or business information must not take place in public places (elevators, lobbies, hallways, cafeteria, etc.), and must not take place in front of people who are not involved in the individual's care or service.

Only employees or associates¹ who receive formal approval and are issued personal access codes may use the IWK's electronic information systems. The IWK's electronic information systems allow access to patient and other confidential information for authorized users only. This confidential information is protected by the law and policy. Accessing confidential information for a reason other than carrying out work duties is forbidden.

Safeguarding confidential patient and business information is a serious responsibility. All IWK employees and associates¹ are required to sign this Pledge of Confidentiality promising to keep personal access codes, information accessed with them, and all other forms of private information confidential.

Note: Your Pledge of Confidentiality is a two sided form – use the scroll bar to view the second page

Employee's Forms/Correct Data

Click to Sign

Click the "Click to Sign" button to sign your forms. The next form to sign will automatically appear and a check mark will appear by each signed form.

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- ✓ Nova Scotia Personal Tax Credits Return 2023
- IWK_Pledge of Confidentiality 2016-10-04
- IWK Policies Sign Off 2021

Need help signing your forms? [Click here for instructions.](#)



Pledge of Confidentiality

I pledge to keep confidential all matters that come to my attention while working for the IWK Health Centre or during my association with the IWK Health Centre. I will follow all IWK policies and procedures, including those concerning privacy and confidentiality. I will access, use and disclose confidential information on a need-to-know basis (if required for the work I am doing, or when I am required to do so by law).

I also understand and agree that:

- My electronic information system(s) access code(s) (my password) is like my legal signature. I am responsible for all actions performed when the electronic information system has been opened using my password.
- All electronically stored patient information is confidential and must be treated with the same care as printed or written information.
- I will not disclose my access (my password) to anyone. I will not attempt to find out another person's access code.
- I will access patient information on a "need to know" bases only, when required to do so for my work at the IWK.
- If I think my access code (my password) has been misused, lost or stolen, I will contact the IWK Privacy Office and the Information Technology department immediately.

I understand that any breach of confidentiality, inappropriate access, or misuse of information at the IWK, including misuse of my confidential access code(s), violate IWK policy and may result in disciplinary action such as dismissal, reporting of my conduct to my professional regulatory body or sponsoring agency, and other actions as required by law.

I understand that these obligations continue after my work/association with the IWK Health Centre has ended.

Signature: _____	Date: _____
Department: _____	

These

Employee's Forms Correct Data Need help signing your forms? [Click here for instructions.](#)

[Click to Sign](#)

Click the "Click to Sign" button to e-sign your forms. The next form to sign will automatically appear and a check mark will appear by each signed form.

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- ✓ IWK_New Hire Form April 2016
- ✓ Nova Scotia Personal Tax Credits Return 2023
- ✓ IWK_Pledge of Confidentiality 2016-10-04
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An Introduction to our Health Centre: Corporate Policies



During the online Onboarding module, I was provided documentation providing an overview of key policies, and links to the full policy statement for the following:

- Respectful Workplace – Violence Policy
- Respectful Workplace – Harassment and Bullying Policy
- Smoke Free Policy
- Dress Code / Appearance Protocol Policy
- Scent Reduction Policy
- Use of Identification Badges Policy
- Code of Conduct

I have reviewed, understand and agree to adhere to the above policies and procedures

Signature

Date

These corporate policies were provided to you in the onboarding panels (see page 41)

You have digitally signed your onboarding package

If you wish to save or print copies of these forms, click **Print Package** or use the **Save** or **Print** buttons

All your forms have been signed. Documents are ready to be printed and submitted. Select "Print" to print your documents. Then click "Submit All Documents" to complete the process.

[Submit All Documents](#)

[Print Package](#)

1 of 8

 Canada Revenue Agency / Agence du revenu du Canada

2023 Personal Tax Credits Return Protected B when completed TD1

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions. Fill out this form based on the best estimate of your circumstances. If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

Last name WAFFLES	First name and initial(s) WALTER	Date of birth (YYYY/MM/DD) 1980/02/10	Employee number
Address 12 MAPLE SYRUP LANE BEDFORD		Postal code B 3 Z 2 P 2	For non-residents only Country of permanent residence
		Social insurance number 1 1 1 2 2 3 3 3	

1. Basic personal amount – Every resident of Canada can enter a basic personal amount of \$15,000. However, if your net income from all sources will be greater than \$165,430 and you enter \$15,000, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than \$165,430, you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the 2023 Personal Tax Credits Return, and enter the calculated amount here.

2. Canada caregiver amount for infirm children under age 18 – Only one parent may claim \$2,499 for each infirm child born in 2006 or later who lives with both parents throughout the year. If the child does not live with both parents throughout the year, the parent who has the right to claim the "Amount for an eligible dependent" on line 8 may also claim the Canada caregiver amount for the child.

Click the **Submit All Documents** button to finish your onboarding module

All your forms have been signed. Documents are ready to be printed and submitted. Select "Print" to print your documents. Then click "Submit All Documents" to complete the process.

Submit All Documents

Print Package

1 of 8

Canada Revenue Agency / Agence du revenu du Canada

2023 Personal Tax Credits Return

Protected B when completed TD1

Read page 2 before filling out this form. Your employer or payer will use this form to determine the amount of your tax deductions. Fill out this form based on the best estimate of your circumstances. If you do not fill out this form, your tax deductions will only include the basic personal amount, estimated by your employer or payer based on the income they pay you.

Last name WAFFLES	First name and initial(s) WALTER	Date of birth (YYYY/MM/DD) 1980/02/10	Employee number
Address 12 MAPLE SYRUP LANE BEDFORD		Postal code B3Z2P2	For non-residents only Country of permanent residence
			Social insurance number 1 1 1 2 2 2 3 3 3

1. **Basic personal amount** – Every resident of Canada can enter a basic personal amount of \$15,000. However, if your net income from all sources will be greater than \$165,430 and you enter \$15,000, you may have an amount owing on your income tax and benefit return at the end of the tax year. If your income from all sources will be greater than \$165,430, you have the option to calculate a partial claim. To do so, fill in the appropriate section of Form TD1-WS, Worksheet for the 2023 Personal Tax Credits Return, and enter the calculated amount here.

2. **Canada caregiver amount for infirm children under age 18** – Only one parent may claim \$2,499 for each infirm child born in 2006 or later who lives with both parents throughout the year. If the child does not live with both parents throughout the year, the

Congratulations, you have completed the first step. The rest of your onboarding process will occur at Orientation.

You may now close your browser.

You have completed your online onboarding module

If there are any outstanding documents you still need to submit, please email them directly to onboarding@iwk.nshealth.ca

You will now receive a system-generated email to confirm you have completed onboarding and to provide information on your next steps of your onboarding and orientation.



Congratulations! You have completed the electronic Onboarding module and are now ready to proceed with the next steps to becoming an IWK Health Employee. Your next steps are as follows:

Human Resources:

1. Submit any outstanding new hire documentation to Onboarding@iwk.nshealth.ca, including your Child Abuse Registry Results. The results of your Child Abuse Registry Check will be mailed to your home address. A copy must be provided to Human Resources for your employee file.
2. To learn about our **group benefits coverage** (Life, Dental, Health, etc), please visit [Health Association Nova Scotia](#) and review the benefits pamphlets. To learn about our **pension plan**, please visit [Nova Scotia Health Employees' Pension Plan](#).

If you are benefit eligible, the Pension, Benefits and Leaves team will be reaching out to you via email shortly with your customized enrollment package.

Occupational Health, Safety and Wellness:

All new hires must complete Pre-Employment Health Screening with Occupational Health, Safety, and Wellness (OHSW) within 30 days of their start date. The required forms, which have been supplied in Onboarding, must be completed prior