Payment for excess in-house call duty weekend is done in accordance with the PAIRS Collective Agreement, in particular Articles 9.2 through 9.4.

Please submit one form for each person on each occasion.

**Please attach a valid call schedule when submitting this form.**

**Section 1: Resident Information**

|  |  |
| --- | --- |
| Name: |  |
| Program: |  |
| Training Year: |  |

**Section 2: Call Duty Information**

|  |  |
| --- | --- |
| Date of duty: | Click here to enter a date. |
| Time (from-to): |  |
| Reason for excess on-call duty: |  |

**Section 3: Program Approval**

|  |  |  |  |
| --- | --- | --- | --- |
| Administrative Resident: | |  | |
| Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Program Director: | |  | |
| Signature |  | Date |  |

|  |
| --- |
| **For PGME Office use only:**  Earning Code: 408  1-101748-­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_-60101-4000-1129­­\_\_\_\_\_\_  Amount paid: \_\_\_\_\_\_\_\_\_\_\_\_\_  Date paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **Please send all documents and required information (via email, fax or mail) to the following location:**  Jennifer Dybvig  PGME Office, College of Medicine, University of Saskatchewan  Room 3A10.6, Health Sciences Building  Box 17 – 107 Wiggins Road, Saskatoon, SK S7N 5E5  Phone: 306-966-1864 Fax: 306-966-5224 Email: jennifer.dybvig@usask.ca |