

2026 Proxy Authorization For Layoff & Bumping

I understand I may exercise my option, in seniority order, to select a temporary work opportunity / assignment. If I am not available to attend my Layoff and Bumping Selection Appointment on the assigned date and time, and intend to select a temporary opportunity / assignment, I must complete this Proxy Authorization form.

I give permission to the below listed proxy who has agreed to attend my Layoff and Bumping Selection Appointment and act on my behalf.

I understand that:

1. My proxy must be a minimum of 21 years of age.
2. I am responsible for my proxy attending my Layoff and Bumping Selection Appointment at the correct date and time.
3. The bumping selection my designated proxy makes on my behalf is final and binding.
4. My proxy will be responsible to bring me the signed contract (i.e. Placement Letter).

I must complete and submit the 2026 Proxy Authorization For Layoff & Bumping Form to Talent Acquisition no later than two (2) business days prior to my scheduled Layoff & Bumping Appointment.

Recall Availability Date

I will be available for recall opportunities / assignments on _____ in the classifications that I am eligible to be considered for as per my 'Personal Work Selection List' (PWSL).

Send via email to the attention of Talent Acquisition to: workselection@toronto.ca

Designated Proxy Name (Please Print)

Date Signed

Designated Proxy Signature

Designated Proxy Telephone

By signing below, I give permission to the above named Proxy to act on my behalf to select my temporary work opportunity / assignment.

Employee Name (Please Print)

Employee #

Employee Signature

Date Signed

2026 Layoff & Bumping Preference Form

Below are my temporary Layoff & Bumping opportunity preferences with number one (1) being my greatest preference.

I understand that the opportunity selected will be based on my seniority and eligibility as indicated on my Personal Work Selection List (PWSL).

My Layoff & Bumping Preference	Job ID & Classification Selected	My Layoff & Bumping Preference	Job ID & Classification Selected
1		16	
2		17	
3		18	
4		19	
5		20	
6		21	
7		22	
8		23	
9		24	
10		25	
11		26	
12		27	
13		28	
14		29	
15		30	

Employee Name (Please Print)

Employee #

Employee Signature

Date Signed