

# **Application Form**

# Intro Shop Steward (two-day) Workshops 2017

NOTE: Level 1 Intro Shop Steward Workshop must be completed before applying for Level 2.

Region Deadline	Workshop	Workshop Date	Locations open to attend
Lower Mainland Burnaby January 9, 2017	Level 1	February 7, 8	Squamish to Hope
Lower Mainland Burnaby January 9, 2017	Level 2	February 7, 8	Squamish to Hope
Sechelt January 12, 2017	Level 1	February 15, 16	Sechelt, Gibsons, Powell River
Courtenay January 23, 2017	Level 1	February 22, 23	Courtenay, Port Alberni, Qualicum, Parksville, Campbell River, Powell River
Victoria January 30, 2017	Level 1	February 28, March 1	Greater Victoria, Sooke, Saanich, Gulf Islands
Victoria January 30, 2017	Level 2	March 2, 3	Greater Victoria, Sooke, Saanich, Gulf Islands
Nelson February 6, 2017	Level 2	March 6, 7	Nelson, Castlegar, Arrow Lakes, Trail, Grand Forks
Cranbrook February 8, 2017	Level 2	March 9, 10	Cranbrook, Fernie, Kimberley, Windermere, Creston, Golden
Kelowna February 13, 2017	Level 1	March 13, 14	South Okanagan, Oliver, Osoyoos, Princeton, Keremeos, Penticton, Summerland, Central Okanagan, Vernon, Enderby, Armstrong
Kelowna February 13, 2017	Level 2	March 13, 14	South Okanagan, Oliver, Osoyoos, Princeton, Keremeos, Penticton, Summerland, Central Okanagan, Vernon, Enderby, Armstrong

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Region Deadline	Workshop	Workshop Date	Locations open to attend
Kamloops February 15, 2017	Level 1	March 15, 16	Kamloops, Lillooet, Merritt, 100 Miles, Salmon Arm, Revelstoke, Cariboo-Chilcotin, South Cariboo
Kamloops February 15, 2017	Level 2	March 15, 16	Kamloops, Lillooet, Merritt, 100 Miles, Salmon Arm, Revelstoke, Cariboo-Chilcotin, South Cariboo
Prince George February 27, 2017	Level 1	March 27, 28	Quesnel, Burns Lake, Vander hoof Prince George, Fraser Lake, Fort St. James, Mackenzie, Chetwynd First Nations Collective Agreements, Queen Charlotte Hospital, Masset Hospital, Skidegate, Nisga'a and Gitxsan, Peace River North and South, Fort Nelson, Tumbler Ridge
Prince George February 27, 2017	Level 2	March 29, 30	Quesnel, Burns Lake, Vander hoof Prince George, Fraser Lake, Fort St. James, Mackenzie, Chetwynd First Nations Collective Agreements, Queen Charlotte Hospital, Masset Hospital, Skidegate, Nisga'a and Gitxsan, Peace River North and South, Fort Nelson, Tumbler Ridge

Send application (complete ALL pages) by fax or mail to:

- FAX: 604-739-1510
- EMAIL: <u>Attention: Vickie Phillips</u> vphillips@heu.org
- MAIL: HEU Provincial Office <u>EDUCATION DEPARTMENT</u> Attention: <u>Vickie Phillips</u> 5000 North Fraser Way Burnaby, BC V5J 5M3

DATE SENT: \_\_\_\_\_\_\_ # OF PAGES: \_\_\_\_\_

### Intro Shop Steward (two-day) Workshops - 2017

### PLEASE PRINT IN DARK INK

I identify my gender as:			
Last Name:	First Name:		
Have you recently moved?	No If yes, when?		
Address:	Apt/Suite:		
City:	Postal Code:		
	Cell/Pager:		
Work Phone (include ext#):	rk Phone (include ext#): Extension:		
Personal Email:			
Job Title:	Dept:		
	nployer: Work Site: e.g. Northern Health, PHSA, Sodexo, Well-Being e.g. VGH, Beacon Hill Villa, Reids Corner		
Local:			
What union position (if any) do you h	old at your local?		
Employment Status:   Full-tin	ne Part-time Casual		
Region:   Fraser   Interior     Northern   Vancor	uver Coastal 🛛 🗌 Vancouver Island		
Do you identify as a member of an ec	uity seeking group?		
(Check any that apply)	LGBTQ2SImage: First NationsPeople with disAbilitiesImage: Ethnic DiversityWomenImage: Non-state		
Emergency contact (Name & Phone):			

Why do you want	to attend this	workshop?
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How will you use the skills you learn at the course?

How will your own experience add to the workshop?

#### The following two questions must be filled out by Level 2 applicants only:

Please indicate where and when you have previously taken shop steward training:

1.	 	
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2.	 	
3.		

How long have you been handling grievances? (12 months required)

Signature	of	Applicant
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Date

You will be notified if your application is accepted.

Due to a limited amount of space, we may not be able to accept all applications. We will let you know if you are not successful.

Personal information will be used solely for the purpose of processing this application form. It will not be disclosed to any other party.

#### This application must be signed by your Local Chairperson or Secretary-Treasurer.

HEU Member Name: \_\_\_\_\_

HEU Local: \_\_\_\_\_

Workshop (location & date): \_\_\_\_\_

This member is our local unions':

1<sup>st</sup> choice

2<sup>nd</sup> choice

3<sup>rd</sup> choice

This is to confirm applicant is a member in good standing.

Local Chairperson/Secretary-Treasurer (please print)

Signature

Date