APPLICATION FORM

HEU Equity Standing Committees

NAME: __________________________________________

Application Deadline: Thursday, March 31, 2022

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

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

FAX: 604-739-1510

EMAIL: schan@heu.org

MAIL: HEU Provincial Office
      5000 North Fraser Way
      Burnaby, B.C. V5J 5M3
      ATTENTION: Shemaine Chan

DATE SENT: ___________________________ # OF PAGES: _______
SECTION A – PERSONAL INFORMATION

Last Name: ___________________________ First Name: ___________________________

Address: ____________________________________________ Apt/Suite: __________

City: ___________________________________________ Postal Code: _______________

Mailing Address (if different): _________________________________________________

Preferred Contact Phone Number: _____________________________________________

Home Phone: ___________________________ Cell: _____________________________

Personal Email: ____________________________________________________________

Job Title: __________________________________________________________________

Employer: ___________________ Work Site Name: _______________________________

HEU Local (if known): _______________________________________________________

Employment Status:  ☐ Full-time    ☐ Part-time    ☐ Casual

Region:  ☐ North    ☐ Interior    ☐ Vancouver Coastal (includes PHSA)
         ☐ Fraser    ☐ Vancouver Island

Do you self-identify with any of the following equity groups? (check any that apply)

☐ Indigenous    ☐ LGBTQ2S+    ☐ Worker with disabilities    ☐ Worker of Colour
☐ Two-spirited, women & non-binary    ☐ Young Worker (33 years or younger)

Emergency contact (Name & Phone): _____________________________________________

Do you have any medical condition(s) or require special accommodations that we should be aware of, that could impact your ability to participate in this event?  Yes ☐ No ☐

If yes, please briefly explain. (In some cases, a Physician’s note may be required)

Disclaimer: Personal information collected on this form, will be used to process this application and to update your contact information in HEU’s membership database
SECTION B – APPLICANT’S QUESTIONNAIRE:

1. Which Equity Standing Committee are you applying for? (Please select one only)
   - □ Ethnic Diversity
   - □ Indigenous Peoples
   - □ Two-Spirited, Women & Non-Binary
   - □ People with Disabilities
   - □ Pink Triangle
   - □ Young Workers (33 years or younger)

2. Why do you want to be on this Equity Standing Committee?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

3. What skills and experience would you bring to this Equity Standing Committee?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

4. What do you think are some of the biggest challenges facing members of this equity group?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

5. What would you like to see this Equity Standing Committee do over the next two years?
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

______________________________  ___________________________
Signature of Applicant            Date