

EXPRESSION OF INTEREST

Prevention Steward Pilot Project

For Members employed with Island Health

Your name:

Submissio	n Deadline: Friday, August 12, 2022		
Please send this application form with your resume and cover letter. Applications without a cover letter and resume will <u>not</u> be considered			
Send application (complete all pages clearly) by fax <u>or</u> mail <u>or</u> email:			
FAX: EMAIL: MAIL: Attention:	604-739-1510 ohs@heu.org HEU Provincial Office 5000 North Fraser Way, Burnaby BC V5J 5M3 Rometa Prasad		
Date sent:	Number of pages:		

Please review the information letter before completing this form. If filling out by hand, please print clearly in dark ink.

First name:	La	st name:	
Address:		Apt/Suite:	
City:		Postal code:	
Mailing address (if diffe	erent):		
Preferred contact phon	ne number:		
		II:	
Personal email (not em	nployer email):		
Job title:			
Employer: Island Heal	th Wo	ork site name:	
HEU Local (if known):			
Employment status: F	ull-time		
Do you self-identify wapply)	vith any of the following	g equity groups? (Check all that	
□Indigenous	□2SLGBTQ+	☐Two-spirit, women & non-binary	/
☐Worker of colour	□Worker with disabilition	es □Young worker (33 or younger)	
discrimination, values diver applications from qualified p	sity, and is representative of topeople of all equity seeking gi	d to being a workplace that is free of he communities we serve. We encourage oups, including Indigenous persons, Black gender expressions and identities, and sexua	al
Disclaimer: Contact informa HEU's membership databa		I be used to update your contact information	in
Signature of applicant		Date	