



HEU Application Form

Identity and Ancestry Workshop – 2023(online)

Registration Deadline: April 5, 2023

YOUR NAME: _____

<u>WORKSHOP DATE</u>	<u>LOCATION</u>	<u>SELECTION</u>
May 4, 2023	Online	
May 5, 2023	Online	
May 16, 2023	Online	
May 17, 2023	Online	

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

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

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:** _____

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PLEASE REVIEW THE INFORMATION LETTER BEFORE COMPLETING THIS APPLICATION
PLEASE PRINT CLEARLY IN DARK INK

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 (do not use the employer 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 2SLGBTQIA+ Persons with disabilities Worker of Colour
 Two-spirit, women & non-binary Young Worker (33 years or younger)

Emergency contact Name: _____ Phone: _____

Do you have any medical condition(s) or is there anything else 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)

Do you have any accessibility requirements (i.e. ergonomic chair)? If so, please specify:

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 – QUESTIONNAIRE

A. Why do you want to attend this workshop?

B. How will you use the skills you learn at the workshop?

C. How will your own experience add to the workshop?

Signature of Applicant

Date

After the closing date of this workshop, you will be notified by email if your application is accepted and you will be required to apply for leave of absence for union business. Due to a limited amount of space, we may not be able to accept all applications. We will also notify unsuccessful applicants by email. **Please ensure the email address on your application is current.**