

Application



INTRO SHOP STEWARD LEVEL 2 WORKSHOP

Date: Multiple Dates

Registration Deadline: Multiple Dates

Location: Multiple Locations

Your Name: _____

Please note

Incomplete applications will not be accepted.

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.

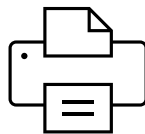
Please ensure the email address on your application is current.

Submit your application form by email, fax, or mail.



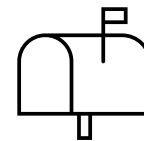
EMAIL:

education@heu.org



Fax:

604-739-1510



**HEU Provincial Office
5000 North Fraser Way
Burnaby, BC V5J 5M3
Attention: EDUCATION**

Date Sent: _____ **# of pages:** _____

SECTION A – PERSONAL INFORMATION

Last Name: _____ First Name: _____

Address: _____ Apt/Suite: _____

City: _____ Postal Code: _____

Mailing Address (if different): _____

Primary Phone: _____ Cell Phone: _____

Personal Email (do not use work email): _____

Employer: _____ Worksite Name: _____

Job Title: _____ 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+ Worker with disabilities Worker of Colour

2-Spirit, Women or 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 an 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

Why do you want to attend this workshop?

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

How will your own experience add to the workshop?

Indicate **where** and **when** you had previously taken shop steward training?

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

Workshop Choice

Workshop Date	Location	
March 12 & 13, 2024	Provincial Office, Burnaby	<input type="checkbox"/>
March 26 & 27, 2024	Online via Zoom	<input type="checkbox"/>
April 17 & 18, 2024	Vancouver Island	<input type="checkbox"/>
June 12 & 13, 2024	Interior	<input type="checkbox"/>
September 9 & 10, 2024	Provincial Office, Burnaby	<input type="checkbox"/>
September 11 & 12, 2024	Surrey	<input type="checkbox"/>

Signature of Applicant

Date

SECTION C – WORKSHOP INFORMATION

This section to be filled out by Local Chairperson or Secretary Treasurer.

HEU Members Name: _____

HEU Local: _____

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

This form must be signed by your Local Chairperson or Secretary-Treasurer for endorsement, or alternatively, an email confirmation can be sent to education@heu.org (see instructions on first page of this form).

If they are not able to sign the application in person, they can email their endorsement to education@heu.org with the subject line “Chief Shop Steward” and include the following in the body of the email: member’s name, Chair/S-T name and position, as well as the name of the Local and their endorsement. Emailed endorsements must be received by the registration deadline.

Applicants cannot sign on their local’s behalf.

Local Chairperson/Secretary-Treasurer
(please print)

Signature