

Application



CLC WINTER SCHOOL 2026

Date: January 11 – February 13, 2026

Location: Harrison, BC

Registration Deadline: November 14, 2025

Your Name: _____

Please note

You will need to complete Section A, B, C & D.

Incomplete applications will not be accepted.

After the closing date listed above, 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.

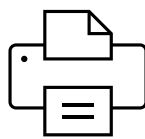
Please ensure the email address on your application is current.

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



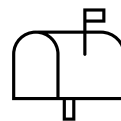
EMAIL:

CLCevents@heu.org



Fax:

604-739-1510



HEU Provincial Office

5000 North Fraser Way

Burnaby, BC V5J 5M3

Attention: CLC Winter School

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

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.

PROVINCIAL OFFICE
5000 North Fraser Way
Burnaby, BC V5J 5M3

TEL 1-800-663-5813
FAX 604-739-1510
WEB www.heu.org

BARB NEDERPEL, President
LYNN BUECKERT, Secretary-Business Manager
BETTY VALENZUELA, Financial Secretary

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 Coastal/PHSA Fraser 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 Older Persons (55 years or older)

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 accessibility requirements? If so, please specify:

Do you have any food allergies or dietary requirements? If so, please specify:

SECTION B – COURSE SELECTION

1ST Choice: _____ Week: _____

2nd Choice: _____ Week: _____

3rd Choice: _____ Week: _____

Do any of these courses require prerequisites? Yes No

If yes, have you completed the prerequisites? Please list them below:

SECTION C – QUESTIONNAIRE

Have you attended the CLC Winter School in the past?

Yes /When? _____ No _____

Why do you want to attend this educational opportunity and how will this course help you in your role as a union activist?

What will you do with the information gained as a union, labour, or community activist? (Please be specific).

How will this course help you in your union work? (Please be specific on how the knowledge will improve your local).

Please explain why you have selected the above courses and what knowledge you hope to gain.

What experience and skills do you bring to the courses selected?

Are you active in your labour council and, if so, how?

Please summarize your current trade union activities including HEU Executive positions, committees, training courses, etc. and participation in CUPE, CLC, and BC Federation of Labour.

Please indicate if you are active in any community groups, coalitions, or political organizations (i.e. Women’s groups, LGBTQ2S, BC NDP, Council of Canadians, seniors’ network, etc)

SECTION D – OTHER

Do you require Child Care? Yes No

If yes, please indicate ages:

Do you require Bus Transportation? Yes No

There will be a bus that picks up at Pacific Central Station, Coquitlam, and Guildford on Sundays. On Fridays the bus will depart Harrison and drop off at Guildford, Coquitlam, Vancouver Airport and Pacific Central Station.

Signature of Applicant

Date

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