

Involvement

In Union Health and Safety

	Current	Past (years)	Comments
Workplace Joint H&S Committee			
Local H&S Committee			
CUPE Division H&S Committee			
Federation of Labour H&S Committee			
Other (describe)			

At the Local Union

	Current	Past (years)	Comments
Steward			
Local Executive Member			
Committees			
Other (describe)			



CUPE’S NATIONAL HEALTH AND SAFETY AWARD

The closing date for nominations is July 29, 2011

Do you know someone who has made a significant health and safety contribution?

CUPE’s National Health and Safety Committee would like to hear from you for their National Health and Safety Award.

The committee is looking for someone:

- Whose actions have helped others
- Whose activities have:
  - solved problems
  - achieved important victories
  - established precedents
  - improved workplace conditions
  - helped to recognize occupational illness or disease
- Who is a CUPE member or CUPE retiree in good standing
- Who is a health and safety leader and activist

The award will be presented at CUPE’s 2011 National Convention in Vancouver.

To make a nomination, please complete this form and send it to: **CUPE National Health and Safety Award**  
Health and Safety Branch  
CUPE National Office  
1375 St. Laurent Boulevard  
Ottawa, Ontario K1G 0Z7  
Fax: (613) 237-5508

**Please note that CUPE staff and current CUPE National Health and Safety Committee members who have sat on the National H&S Committee within the last five years are not eligible for the award.**

# Nomination Form

Nominations may be made by a Local Union or CUPE Division and **must be signed and supported by the Local’s President and one other Local or Division Executive member.** Information submitted may be verified.

Name of Nominee:

Local Union No:

Mailing Address:

Number and Street

City

Province

Postal Code

Telephone: ( ) ( )

Home

Work

Occupation:

If retired, occupation when employed:

How many years has the nominee been a CUPE member?

## Submitted by

Name:

Local Union Name:

Local Union No:

Mailing Address:

Number and Street

City

Province

Postal Code

Telephone: ( ) ( )

Home

Work

Fax: ( ) Email:

Local President’s Signature:

AND Signature Please print

Local or Division Executive Member’s Signature:

Signature Please print

## Contribution to Health and Safety at the Local Union Level

**Please tell us how the nominee has contributed to improved health and safety at the local level. Include what the nominee has done, how it was achieved, where and when. Don’t hesitate to add an additional sheet if required.**

What has the nominee done?

How was it achieved?

Where?

When?

## Other Contributions to Health and Safety

**Please tell us if the nominee has contributed to improved health and safety at the Provincial Division level. Include what the nominee has done, how it was achieved, where and when. Don’t hesitate to add an additional sheet if required.**

What has the nominee done?

How was it achieved?

Where?

When?