# NATIONAL REPRESENTATIVE APPLICATION FOR EMPLOYMENT

This form is designed to be completed electronically or by hand and may be returned by email or regular mail

PERSONAL INFORMATION									
Name:									
	(First)				(	Last)			
Address:									
	(Street Ad	dress)					1	1	
	City:			Prov.			Postal Code	:	
Phone #:	Work:			Cell:			Home:		
Email:									
Local # (if C	CUPE mer	mber)							
Do you hav	e a valid	driver's lice	ence?			Yes		No	
equity grou	u self-identify as part of CUPE's employment groups? (Women, Indigenous peoples, Persons with ties, racialized people and LGBTQI2S+).								
LANGUAGE SKILLS (Legend)									
			LAN	GUAGE	SKILLS (L	egend)			
		Englis		GUAGE	SKILLS (L	egend)	França	nis	
	N/A	Englis Beginner		Advance		s.o.	França Débutant	iis Intermédiaire	Avancé
Spoken	N/A		h			1	1		Avancé
Spoken Read	N/A		h		d	1	1		Avancé
-	N/A		h		d Parlé	1	1		Avancé
Read Written	N/A nguages	Beginner	h		Parlé	1	1		Avancé
Read Written		Beginner	h	Advance	Parlé	1	1		Avancé
Read Written Other la	anguages	Beginner	h	Advance	Parlé Lu Écrit	S.O.	1		Avancé
Read Written Other la	anguages	Beginner s e highest	h Intermediate	Advanced EDU ation you	Parlé Lu Écrit  CATION have achie	s.o.	1	Intermédiaire	Avancé
Read Written Other la	anguages dicate the	Beginner s e highest	h Intermediate	Advanced  EDU  ation you	Parlé Lu Écrit  CATION have achie	s.o.	Débutant	Intermédiaire	Avancé
Read Written Other la	dicate the diploma	Beginner s e highest	h Intermediate	EDU	Parlé Lu Écrit  CATION have achie	s.o.  eved.  l and/or Te	Débutant	Intermédiaire	Avancé
Read Written Other la Please ind High school	dicate the diploma	Beginner s e highest	evel of educa	EDU	Parlé Lu Écrit  CATION have achie	s.o.  eved.  l and/or Te	Débutant	Intermédiaire	Avancé

# **EMPLOYMENT HISTORY**

State detailed employment from current to last or attach résumé.

Name of current / Last employer:		
Address:		
Duration:	From:	То:
Your position / title:		
Describe your work e	xperience in this position, inclu	ding responsibilities and skills.
Name of employer:		
Address:		
Duration:	From:	То:
Your position / title:		
Describe your work e	xperience in this position, inclu	ding responsibilities and skills.

### **UNION EXPERIENCE**

1. List all positions (elected, volunteered or paid) you have held in your local, CUPE or other labour organizations, committees, etc. Include start date and length of time in each position.

Union Position Held	From	То
1.		
2.		
3.		
4.		
5.		
6.		

2. Outline your experience in the following areas. Be specific and as detailed as possible and include dates. If required, use Appendix "A" for additional page(s).

	a)	Experience in organizing (union or other organizations)
1.		
2.		
3.		
4.		
	b)	Experience in negotiations
1.		
2.		
3.		
4.		
	c)	Experience in strikes and lockouts
1.		
2.		
3.		
4.		
	d)	Experience in grievance preparation, presentation and settlement
1.		
2.		
3.		
4.		
	e)	Experience in arbitration preparation and presentation
1.		
2.		
3.		
4.		

	f)	Experience in political action and lobbying
1.		
2.		
3.		
4.		
3.	Ou	itline your experience in the following areas. Be specific and as detailed as possible and include
		tes. If required, use Appendix "A" for additional page(s).
	a)	Experience in providing advice and guidance to a person or a group of people
1.		
2.		
3.		
4.		
_	b)	Experience in facilitating discussions or consultations on sensitive matters
1.		
2.		
3.		
4.		
1	c)	Experience in planning and coordinating activities for a group of people
1.		
2.		
3.		
4.	d)	Experience in helping a person or a group of people in a conflict situation
1.	u)	Experience in helping a person or a group of people in a conflict situation
2.		
3.		
4.		
		TRAINING, COURSES AND WORKSHOPS
List	anv	CUPE Bargaining Series or Stewarding Learning Series workshops taken in the last three years?
1.	<del></del>	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
2.		
3.	+	
4.	+	
5.		
6.		
7.		
γ.		

	Other labour	related education or rele	evant courses	
		REFERENCES		
	ces, one of which sh	ould be a member of a trade u	nion. Please note that tl	hey will be
contacted.	T			
Name:				
	(First)	(Last)		
Title:				
Union:				
Business Address:				
	(Street Address)			
	City:	Prov.	Postal Code:	
Phone #:	Work:	Cell:	Home:	
Email:		·		
Name:				
Name.	(First)	(1,0.4)		
	(First)	(Last)		
Title:				
Union:				
Business Address:				
	(Street Address)			
	City:	Prov.	Postal Code:	
Phone #:	Work:	Cell:	Home:	-
Email:				

# **CUPE National Representative assigned to your Local** (if applicable and if not provided in the previous section)

Name:		
	(First)	(Last)
Area Office:		

#### Please return to:

Organizing and Regional Services Department
Canadian Union of Public Employees
1375 St. Laurent Blvd.
Ottawa, Ontario
K1G 0Z7

E-mail: <u>ORS@cupe.ca</u> – Fax: (613) 237-5508

As part of its commitment to employment equity, CUPE encourages applications from qualified members of the five designated groups: Women, Indigenous peoples, persons with disabilities, racialized people and LGBTQ2S+.

CUPE welcomes and encourages applications from people with disabilities. Accommodations are available on request for candidates taking part in all aspects of the selection process.

# **APPENDIX "A"**

(Use if required)