



## Committee/Council Application Form

Name: \_\_\_\_\_

Member mailing address: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Committee Preferred: 1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

Local: \_\_\_\_\_ Sector: \_\_\_\_\_

My Local is aware of my interest in this committee and this application Yes No

President (Name and Signature): \_\_\_\_\_

Local mailing address: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Fax number: \_\_\_\_\_

Any experience on this committee(s):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you want to sit on the above committee(s):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Return to: CUPE Alberta Division  
Attention: Scott Cush, Recording Secretary  
c/o 300, 10235 - 124 Street NW  
Edmonton, Alberta  
T5N 1P9  
Email: [cupe.alberta.secretary@gmail.com](mailto:cupe.alberta.secretary@gmail.com)**