

**OMBUDSPERSON PROGRAM
APPLICATION FORM**

Name _____

Address _____ City _____

Postal Code _____ Local No. _____

Home Phone No. _____ Work Phone No. _____

E-mail _____ Date: _____

All information supplied will be kept confidential.

We are asking for the following information to try to ensure the diversity of our ombudspersons.

Providing this information is voluntary. It will be kept confidential and seen only by the interview committee.

Please complete the following as it applies to you:

- I am a young worker (30 and under)
- I am by virtue of my race or colour, a racialized minority in Canada
- I am an indigenous (Aboriginal) person of North America
- I am a person with a disability

I describe my sexual orientation as: _____

I describe my gender as:

- Male
- Female
- Self described as _____

What languages do you speak, read and write including sign language.

Present roles/positions within CUPE:

I want to be an ombudsperson at CUPE National events because...

The personal qualities, skills, abilities that I would bring to this role are...

My experiences within CUPE and the other areas of my life which contribute to my ability to work as an ombudsperson include: (Please include relevant CUPE courses that you have taken.)

Other comments or information you would like the interview committee to know about:

*Please include the name and contact information for a CUPE member or staff person who is prepared to recommend you for the role.

Contact:

Name

Position in CUPE

E-mail _____

Phone: (H) _____ (W) _____ (Cell) _____

I am available to travel if necessary. (You will be reimbursed for any required travel)

Yes

No

Please return your completed application to:

Managing Director
Union Development
1375 St Laurent Blvd.
Ottawa, ON
K1G 0Z7
E-mail: education@cupe.ca
Fax: 613-237-5508