

CUPE'S NATIONAL HEALTH AND SAFETY AWARD

The closing date for nominations is July 4, 2017

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

CUPE's National Health and Safety
Committee would like to hear from you.
The National Health and Safety Award is
presented at the National Convention. The
award winner will receive a commemorative
plaque and CUPE will make a donation
to the social justice organization on the
winner's behalf.

The committee is looking for an individual:

- 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 in good standing or CUPE retired member.
- Who is a health and safety leader and activist.

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 health safety@cupe.ca Eligibility is confined to CUPE members. CUPE members who are sitting on, or who have been members of the CUPE National Health and Safety Committee within the last three years are not eligible for this award.



Nomination Form

1. Nominee information

3. Submitted by

Name:

Mailing Address:

Nominations may be made by a Local Union or CUPE Division and must be signed and supported by the Local or Division President and one other Local or Division Executive member or CUPE staff Representative. If the local president is the nominee, then a Vice-President should sign in their place. Information submitted may be verified.

Name of Nominee:	•			
Name of Nominee.				
Local Union No:				
Mailing Address:				
	Number and Street	City	Province	Postal Code
Telephone: ()	() Work		
Home	;	VVOIK		
Occupation:				
If retired, occupation wh	en employed:			
How many years has the	e nominee been a CUPE memb	er?		
	s for Nomination			
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	nt information on the co se contributions. It is		•	
	ng a time-line format.	proformatinat the r		ovidod iii
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•	afety associations, inte		• •	
•	ed to the advancement	O - ·	•	
maximum of 2	500 words.		_	

Number and Street City Province

Telephone:	()	()	Email:	
	Home	Work		
Local or Div	rision President's S	Signature:		
AND		Signature	Please print	
Local or Div	ision Executive			
Member's S	ignature:			
		Signature	Please print	

Local Union No:

Postal Code