



## 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**  
**600 South, 10130 - 112 Street NW**  
**Attention: CUPE AB Recording Secretary**  
**Edmonton, Alberta**  
**T5K 2K4**  
**Email: [secretary@cupeab.org](mailto:secretary@cupeab.org)**