REQUEST FOR UNION DUES TO BE WAIVED



To be completed by a member in addition to their written request for a union dues waiver as per the CUPW National Constitution & Calgary Local By-Laws

“………, upon written request of a member, the local may allow a member who is in arrears in payment of his/her union dues and/or assessments to remain a Member in Good Standing when the member is not working due to illness, accident, leave of absence without pay or suspension or dismissal imposed by the employer and does not have sufficient resources to support himself/herself and his/her family

\*I have requested that my Union dues be waived from ­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_ to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (or until my return to work.)

**To My CUPW Brothers and Sisters**

Date:

I, , a Member in Good Standing do hereby swear that my family and I are suffering severe financial hardship due to my ongoing (health concerns, /education leave / spousal relocation / LWOP/other). ***(Circle relevant type of leave)***

***\*(Please initial all of the relevant issues / criteria.)***  I **will** be receiving one or more of the following monies, financial assistance and/or payments, *if any*, during the requested time period

\_\_\_\_\_\_\_ wages from CPC / employer

\_\_\_\_\_\_\_ Income from another source and/or employment

\_\_\_\_\_\_\_ Employment Insurance Benefits

\_\_\_\_\_\_\_ Workers Compensation Board (WCB) Income

\_\_\_\_\_\_\_ Disability Plan Income *(Short Term & Long Term)*

\_\_\_\_\_\_\_ Student Loans/Bursaries/Grants or any other aid

\_\_\_\_\_\_\_ Spousal Income

Additional proof of “financial hardship” may be required in order to comply with a member’s written request for Union dues to be waived.

Printed Name of Member in Good Standing Signed by Member in Good Standing

**Employee ID: Email: Phone Number:**