

# \*\* Application for Educational \*\*

Event: Virtual Seminar - 1 Day

Date: March 7th, 2025

Courses Offered: Pension Whiz

Local:					Full-Time <input type="checkbox"/>		Part-Time <input type="checkbox"/>	
Classification:	MSC <input type="checkbox"/>	LC <input type="checkbox"/>	P04 <input type="checkbox"/>	P05 <input type="checkbox"/>	RSMC <input type="checkbox"/>	PSBU <input type="checkbox"/>	Other <input type="checkbox"/>	
Name:						Pronouns:		
Sister <input type="checkbox"/>		Brother <input type="checkbox"/>		Non-Binary <input type="checkbox"/>		Equity Seeking Group <input type="checkbox"/>		
Address:					Equity Seeking Group You Identify With:			
City:				Prov:			Postal code:	
Home/Cell Phone:					Work Phone:			
E-mail Address:								
<b>Required For Invitation</b>								

*By signing below I indicate I understand that if my application is accepted to attend this Educational Seminar and I am unable to attend, I or my Local will be held responsible for any nonrefundable costs incurred and any "no-show" costs associated with non-attendance.*

**INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED**

**This includes Postal Code**

\_\_\_\_\_  
**Signature of Local President**

\_\_\_\_\_  
**Signature of Applicant**

**(MUST BE SIGNED OR WILL NOT BE ACCEPTED)**



How long have you been a CUPW Member?	0 - 4 Years <input type="checkbox"/>	5 - 10 Years <input type="checkbox"/>	11 - 15 Years <input type="checkbox"/>	16 - 20 Years <input type="checkbox"/>	20+ Years <input type="checkbox"/>
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Have you attended any other CUPW Educational(s)? Please list.

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What positions have or do you hold in your Local?  
*(e.g Executive, Shop Steward, Committee Member)*

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Please list any involvement in your community.  
*(labour or otherwise).*

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Briefly describe what interests you in the course(s) you are applying for.

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How do you plan to apply what you will learn in this course as a Member of CUPW or in your community?

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