

Unifor Local 414 Members Education Request Form

Members Name: _____

Home Address: _____

Name of Employer: _____

Unit # or Store: _____ **Cell #:** _____

Email Address: _____

Write down your scheduled work shift & hours per day you would have worked if you are accepted to attend the course/seminar/conference you have requested on this form?

What is the name of the course/seminar/conference you want to attend?

What is the date(s) the course/seminar/conference is being held? _____

What is your position(s) if any that you hold in Unifor Local 414?

Why do you want to take this course/seminar/conference? _____

How is this course/seminar/conference going to better assist you in your workplace?

In order to be considered to attend any education course/seminar/conference you must complete the Members Education Request form. Return the completed form by FAX (905) 875-0443 or email: dmugford@uniforlocal414.ca or mail to Unifor Local 414, 274 Alliance Road, Unit # 1, Milton, Ontario L9T 2V2 to the attention of Diana Mugford