Local Information Update

ECUPE SCFP
Ontario

Local No:		-		Date:		
Name of Employer:						
	•					
Sector and Su	ub-sector					
Education	Health 🗌	Municipal [Social Services	University 🗌	Airlines 🗌	
Education Assistants	Ambulance	Ambulance	A.C.L.	Tech/Trades Custodial	Flight	
Custodial/ Maintenance	CCAC Homecare	Library	C.A.S.	Food Service/ Contract	Other	
Office/Clerical/ Technical	Hospital	Electrical Utility	Child Care	Academic		
E.S.L. & Heritage Instructors	Long Term Care	Inside	Community Agency	Student Sevices Union Council		
	Public Health	Outside	Municipal Social Services	Library		
		Public Health	W.S.I.B.	Office/Clerical /Technical		
		Public Transit				
Total Number of	Members:		1		•	
PRESIDENT:						
HOME ADDRESS:	1					
			T		postal code	
Home Phone :			Work Phone:			
Email:			Cell Phone: *Would you like that we contact you regarding campaigns ¬			
				cal/area/sector via text me		
SECRETARY:						
HOME ADDRESS	<u> </u>					
					neatal and	
Home Phone :			Work Phone:			
Email:			Cell Phone:			
			*Would you like that we contact you regarding campaigns relevant to your local/area/sector via text messaging?			
TDEACHDED.	<u> </u>		relevant to your loc	cal/area/sector via text me	essaging? ⊔	
TREASURER:						
HOME ADDRESS:	:					
			_		postal code	
Home Phone :			Work Phone:			
Email:			Cell Phone: *Would you like that we contact you regarding campaigns			
			relevant to your local/area/sector via text messaging?			
Does the local co	llect membership	o contact informat	ion including phone	numbers and emails?		
LOCAL UNION AD	DRESS:					
					postal code	
Local Union Phone:			Local Fax:			
Local Email:						
Local Facebook page:			Local Twitter handle:			