



CUPE ONTARIO



LIVINGSTONE HOLDER, MERVIS WHITE AND MURIEL COLLINS AWARD

The closing date for nominations is April 21st

Do you know a CUPE member who has made a significant contribution on behalf of CUPE members?

The Committee seeks a CUPE member or retiree in good standing within a CUPE Ontario Local or District Council who has demonstrated leadership in:

- Promoting the engagement of racialized workers in all levels of CUPE activity
- Working to remove barriers to full participation in all levels of CUPE activity

CUPE Ontario's Racial Justice Committee wants to hear from you for their Livingstone Holder, Mervis White and Muriel Collins Award

The award shall be presented at CUPE Ontario's Annual Convention

To make a nomination, please complete this form and send it to:

CUPE Ontario
80 Commerce Valley Dr. E., Suite #1
Markham, Ontario L3T 0B2
Fax: 905-739-9740
Or email: kkawall@cupe.on.ca

Nomination Form

1. Nominee information

Nominations may be made by any CUPE union member. Information submitted may be verified.

Name of Nominee: _____

Local Union No: _____

Mailing Address: _____

Number and Street

City

Province

Postal Code

Telephone: ()

Home

()

Work

()

Cell

Occupation: _____

If retired, occupation when employed: _____

How many years has the nominee been a CUPE member? _____

2. Instructions for Nomination

As attached documents, please provide us with any letters of support and all relevant information on the contributions to removing racial barriers and the benefits of these contributions. It is preferred that the information be provided in point form using a time-line format.

Relevant information may include any activities performed within the local union, provincial division, federation of labour, CUPE National, CLC, CBTU, government councils and boards, international groups, and any other activities that contributed to the advancement of anti-oppression work. Please limit to a maximum of 1500 words.

3. Nominator Information

Name: _____

Local Union No: _____

Mailing Address: _____

Number and Street

City

Province

Postal Code

Telephone: ()

Home

()

Work

Email: _____

Local President or Vice-President

Signature (optional):

AND

Signature

Please print

Local Member Signature:

Signature

Please print