

Convention Committee Form

Local No. _____

(Please print or type)

Name of Delegate: _____**Address:** _____

Postal Code

Telephone: (home) _____**(cell)** _____**Email:** _____**Convention Committee you are applying for?**☐**Constitution Committee**

Pre-Convention meeting – April 17 & 18, 2019

☐**Resolution Committee**

Pre-Convention meeting – April 16 & 17, 2019

☐**Ways & Means Committee**

Pre-Convention meeting – April 8 & 9, 2019

☐**Credentials Committee**

Pre-Convention meeting – May 27, 2019

☐**Distribution Committee**

Pre-Convention meeting – May 28, 2019

**Please note: If you plan to be a candidate in any of the elections, then you are not eligible to sit on the Credentials Committee to avoid any perceived conflict of interest.*

What is your preferred language of communication?

French _____ English _____ Bilingual _____

Have you served on a CUPE Ontario convention committee before?

_____ Yes _____ No

If yes, please provide details (which committee/year)

CUPE Ontario welcomes the contributions that our members from equality seeking communities bring to our organization and invites aboriginal people; people of colour; women; gays, lesbians, bisexuals, queer oriented people; transgender and transsexual persons; members of ethnic minorities; people with disabilities; and people of all ages to apply. Please consider providing the info below which will assist us in building committees that better reflect our membership.

I describe my gender as _____

I describe my sexual orientation as _____

I am a young worker (30 and under) _____ Yes _____ No

I am by virtue of my race or colour, a racialized minority in Canada _____ Yes _____ No

I am an indigenous (Aboriginal) person of North America _____ Yes _____ No

I am a person with a disability _____ Yes _____ No

I have the support of my local union (or other chartered organization) president:

_____ Yes _____ No

If yes, please provide details: Name: _____

Phone: _____ Email: _____

Please return completed form **by March 6th** to
CUPE Ontario addressed to Candace Rennick via Shadi Golic
sgolic@cupe.on.ca or fax 905-739-9740