

**Expression of Interest:**

**Occupational Health and Safety Worker Facilitator - LDB**

Name:

Current Position: I am Regular  Auxiliary

Phone Number:

Email:

Department/Store:

Manager:

I have discussed my interest in this training with my manager: Yes  No

*Please answer the questions below in as much detail as you would like. If you have specific examples, please include them.*

**Return your completed form to** [**ohs@bcgeu.ca**](mailto:ohs@bcgeu.ca) **with the subject line “LDB Train the Trainer” by no later than 11:00 pm, Thursday, August 19, 2021.**

1. What is your experience with Occupational Health and Safety and Joint Occupational Health and Safety Committees? (If you have completed any training beyond the OHS Basic 2-day training, please list it here.)
2. Tell us about your experiences with teaching and public speaking, please be specific. (There is no requirement to have formal teaching experience, but we would like to know what experience you have and your level of comfort in front of a crowd.)
3. When you think back to courses you have taken in the past, what has made the training the most impactful?
4. What would make you a good OHS Facilitator?

RAB/CN/MoveUP

EOI LDB union facilitators application July 2021