

# COMMITTEE EXPRESSION OF INTEREST FORM

*-please print clearly-*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Place of Employment (affiliated with SEIU-West):  
\_\_\_\_\_

If you have interest in more than one committee, please rank them according to preference – 1 being your top preference:


Aboriginal

Education

Organizing



Nursing Care

Political Action & Awareness

Retirees


Worker Safety

Worker of Colour

Young Workers  
*(must be under 35)*

Are you currently active in the union as a steward or as a unit officer? Yes      No

If yes, in what position(s) and for how long?

\_\_\_\_\_

Do you regularly attend your unit union meetings? Yes      No

Do you have any experience sitting on SEIU-West or other union committees? Yes      No

How do you think this Committee will benefit you in your workplace or as an elected representative within your unit?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

**Date Submitted:** \_\_\_\_\_