

CUPE Local 973

Request to Attend Conference/Education Course

Conference/Course Information

Course/Conference Name: _____

Course Date: _____ Location: _____

Applicant Information

Name: _____ City County

Phone: _____ Email: _____

Accommodation Required: Yes No Number of nights: _____

List any needed assistive devices or special needs: _____

Briefly explain why you want to attend the conference/course? _____

Applicant understanding:

- I will attend the conference/training in full.
- I will provide a written report as per the union education policy.

Applicant Signature: _____ Date: _____

Union Authorization

Applicant meets qualifications outlined in education policy:

- Attendance at union meetings
- Pre-requisite courses

Approved by: _____ Position: _____

Conditions for Reimbursement

- Voucher with all invoices attached
- Written report attached

CUPE Local 973

Conference/Education Course Written Report

The CUPE Local 973 Education Policy states that members funded to participate in conferences/education are to provide a written report of the program they attended and to do so before being reimbursed for expenses.

Course/Conference Name: _____

Course Date: _____ **Location:** _____

Participant Name: _____ **City** **County**

Phone: _____ **Email:** _____

Narrative (or attach report):

Attendee Signature: _____

Date: _____