

REQUEST TO ATTEND CONFERENCES and EDUCATION COURSES CUPE Local 973



This form is to be completed by any member that would like to register for a CUPE conference or education course. The member understands that as per the Education Policy, the member will attend in full the conference or course they are registered for and will provide a written report for the Executive Team. Please complete this form and forward to Megan Holdbrook, Recording Secretary, for approval and registration.

Conference/Course Name: _____

Course Date: _____

Location: _____

Member Name: _____ **City** _____ **County** _____

Phone Number: _____

Email Address: _____

Accommodation Required? Yes No If yes, # of nights: _____

List any assistance required or food allergies (if applicable): _____

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

I agree I will attend in full and will provide a written report: Yes No

Member Signature: _____ **Date:** _____

Union Authorization:

Meeting date of Membership approval: _____

Member meets qualifications outlined in education policy:

- Attendance at meetings Pre-requisite course

Approved by: _____ **Date:** _____

Conditions for Reimbursement:

- If applicable, vouchers with all receipts attached and forwarded to Secretary-Treasurer for reimbursement

Written report provided Date Received: _____