

Application to the 2018 PSAC Atlantic School
Building it stronger: A union school for movement builders
October 17-21, 2018
DoubleTree by Hilton, Dartmouth, Nova Scotia

COURSE SELECTION

Please rate the courses below in order of preference from 1-5, where 1 indicates the course you would most like attend.

____ Advanced Representation Training for Stewards (English)

____ Advanced Representation Training for Stewards (French)

____ Human Rights Activism (English)

____ Human Rights Activism (French)

____ Advanced Union Elected Officer Training (English)

PERSONAL INFORMATION

NAME _____
(Surname) (First Name)

ADDRESS _____

(Postal Code)

TELEPHONE (____) _____ (____) _____
(Home) (Work)

(____) _____ **E-MAIL** _____
(Cell)

PSAC ID# _____ **COMPONENT/ LOCAL** _____

With this application, I authorize use of the above information for a participants' contact list that will be distributed to at the Atlantic School.

UNION ACTIVITIES

How long have you been a PSAC member? _____

How many members are in your local? _____

Are you a Local Shop Steward? Yes No

What union office(s) do you hold? _____

What other union or community experience do you have?

UNION EDUCATION

Please list any Union courses you have taken, including the date and location.

EMPLOYMENT

Employer: _____

Work location: _____

Occupation/Classification: _____

ACCESS

If you are a member with a disability and require an accommodation for a disability, please fill out the accommodation request form on page 7 of this application.

Do you have any other special requirements that require accommodation?
For ex. religious, dietary?

Yes No

How may we provide accommodation? Please specify:

APPLICANT'S COMMENTS

Please describe your interest in attending the Atlantic and how you will make use of the courses you are interested in being considered for. Please address each course individually. Feel free to attach additional pages.

SIGNATURES

Applicant

With this application, I agree to attend and participate in all sessions, including scheduled evening sessions, and to complete all assignments. I have read the PSAC Statement on Harassment Policy and Statement on Scent Free Environment and understand my responsibilities in accordance with them. These policies can be found at this end of this document.

Signature of applicant

Date of application

Recommendation

Applicants are required to seek the recommendation of their Local President, the Chair of the Regional Women's Committee, Regional Human Rights Committee, Regional Young Workers Committee, Regional Indigenous People's Circle, the President of the Area Council or any of their respective designates. Please ask them to provide the information below.

I recommend the above member attend the 2018 Atlantic School. Specifically, the training will be used to the benefit of the membership by:

Signature

Title

Deadline for applications is June 7, 2018

SELF IDENTIFICATION (OPTIONAL)

The PSAC is committed to ensuring that our programs are accessible to all members. The information requested in this section will help us ensure we have an equitable representation of members from the equity seeking groups identified by the PSAC Human Rights Policy, as well as young workers. This information is confidential. Please select the groups you belong to.

Indigenous Yes No

Racially visible Yes No

Person with a disability? Yes No

If you are a member with a disability and require accommodation, you must fill out the “Request for accommodation of a disability” attached.

LGBTQ2+ Yes No

Woman Yes No

Young worker (35 years and under)? Yes No

PSAC EQUITY CONTACT LISTS

May we add your name to one or more of our respective PSAC Equity contact lists? If yes, this information may be shared with different structures of the PSAC in support of our human rights work.

Yes No

This form can be made available in various formats, including Braille. Contact your PSAC Regional Office for more information.

REQUEST FOR ACCOMMODATION OF A DISABILITY

In order for us to make the training and the training facilities accessible, it is essential that you complete and return this form. The PSAC Accommodation Policy strives to ensure that PSAC events are barrier-free for delegates with disabilities.

NAME _____
(Surname) (First Name)

ADDRESS _____

(Postal Code)

TELEPHONE (____) _____ (____) _____
(Home) (Work)

(____) _____ **E-MAIL** _____
(Cell)

PSAC ID# _____ **COMPONENT/ LOCAL** _____

I am a member with a disability and require accommodation.

If **YES**, to the above question, what are the functional/cognitive limitations arising from your disability? (You are not obliged to disclose your diagnosis; only your functional limitations).

Please list suggestions for accommodating your functional limitations.

Other comments:

You may be required to provide relevant medical documentation that will assist us to respond to your request.

This form is confidential and the information contained within will not be disclosed except where necessary to respond to your request for accommodation.

PSAC STATEMENT ON HARASSMENT

Our union is made strong by Sisters and Brothers working together to improve our working lives and to preserve the rights that we have struggled to achieve. Mutual respect is the cornerstone of this cooperation. The PSAC Constitution states that every member is entitled to be free from discrimination and harassment, both in the union and at the workplace, on the basis of age, sex, colour, national or ethnic origin, race, religion, marital status, family status, criminal record, disability, sexual orientation, gender identity or expression, language, social and economic class or political belief. Members are also entitled to be free from personal harassment.

If you experience harassment at this event, contact the identified Anti-Harassment Resource Person to discuss the situation and possible responses. Our initial approach is to encourage early and informal resolution and to facilitate our members speaking directly with one another to resolve the matter. If this is not successful or possible, the Constitutional and policy mandates on the issue of harassment will be fully and quickly enforced.

Harassment in all its forms, detracts from our common purpose and weakens our union. Let each one of us, as we work together on the important task at hand, treat each other with dignity and respect.

PSAC STATEMENT ON SCENT-FREE ENVIRONMENTS

The Public Service Alliance of Canada is committed to ensuring that all members with disabilities are able to effectively participate in order to contribute to the organization's mandate.

In this regard, the PSAC recognizes that accessibility is an essential requirement for the participation of members with environmental disabilities.

In consideration for the health of our Sisters and Brothers who may suffer from environmental disabilities, and with the goal of eliminating a contaminant from the air, **the PSAC requests that all participants attending any union function refrain from using scented products. These include scented perfumes, colognes, lotions, hairsprays, deodorants and other products promoted by the fragrance industry.**

A participant who notices a problem is encouraged to address the person in a cordial and respectful manner. Any unresolved issues may be brought to the attention of the organizers who may investigate and attempt to find a reasonable accommodation.

By working together, we can create healthier environments for ALL, and accommodate the needs of persons who have environmental disabilities.