

## Eligibility Requirements and Instructions

- ✓ You are eligible to apply for the Family Education Program if you are a Unifor member in good standing, and have a spouse/partner and/or children 18 years of age or younger. *(If you do not have a spouse/partner and/or children 18 years and younger to attend with you, you are not eligible – please look into attending one of our Paid Education Leave Programs instead.)*
- ✓ You do not require Paid Education Leave [PEL] in your contract.
- ✓ You are **NOT eligible** to apply for the Family Education Program if you have attended within the last 10 years.
- ✓ Unifor will provide, free of charge, food and lodging to each participant (and family member) during your stay at the Education Centre.
- ✓ Each participant must contribute their time (vacation, personal leave, etc.). **NO LOST TIME, PER DIEM OR MILEAGE WILL BE PAID.**
- ✓ The program runs from Sunday dinner through to the following Sunday at approximately 11:00 am. Early departures from the program cannot be accommodated. Please ensure you can attend the entire program before applying.
- ✓ Plane tickets will be provided by the National Union (if you are traveling more than 500 kilometers one way, and choose to fly rather than drive).
- ✓ Those requiring an overnight stay while travelling to and from the Centre, will be provided with hotel accommodations. Costs for meals during this overnight stay are your responsibility.
- ✓ ***Please fill out the entire application form***, including date and signatures. Have it signed by your local union President or Financial Secretary and **return all 3 pages of the application by Friday, April 17<sup>th</sup>** to:



Michelle Barrett, Unifor Education Department  
205 Placer Court, Toronto, ON, M2H 3H9  
E-MAIL: [education@unifor.org](mailto:education@unifor.org) FAX: 416.495.6554

Have questions? Contact Michelle at:  
1.800.268.5763, ext #8484  
or by e-mail at [education@unifor.org](mailto:education@unifor.org)

**If you, or a member of your family, require special medical consideration or have particular dietary needs while participating in the Family Program, please ensure you complete the section on page 3 of the application with full details.**

# 2020 Family Education Program Application Form



**REGISTRATION DEADLINE: FRIDAY, APRIL 17<sup>TH</sup>, 2020**

**--- PLEASE PRINT CLEARLY ---**

Member's Name: \_\_\_\_\_  
First Name Last Name

☐ Male  
☐ Female  
☐ Non-Binary

Local Union No. \_\_\_\_\_ Lodge # (if applicable): \_\_\_\_\_

Employed at: \_\_\_\_\_

Please provide the **LAST 6 DIGITS** of your Social Insurance No.: \_\_\_\_\_  
(This is required for tracking attendance of past participants.)

Complete mailing address: \_\_\_\_\_  
(Apt. #, house number, street name, P.O. Box, R.R. #)

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Personal E-mail: \_\_\_\_\_

Home Phone #: (\_\_\_\_\_) \_\_\_\_\_ Cell Phone #: (\_\_\_\_\_) \_\_\_\_\_

Have you or your spouse/partner previously attended the Family Education Program as a member of **ANY** Unifor Local? Yes ☐ No ☐

If yes, what year did you attend? \_\_\_\_\_

**\*\*PLEASE NOTE: You are NOT ELIGIBLE to attend the Family Education Program if you have attended within the last 10 years.**

Will your spouse/partner accompany you? Yes ☐ No ☐

If yes, provide First & Last Name: \_\_\_\_\_

Will dependent children attend the program with you? If so, please provide their information below.

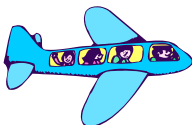
**PLEASE NOTE:** Your dependent children (up to and including the age of 18) may accompany you. **This DOES NOT include nieces, nephews, grandchildren, etc.** Bring proof of health coverage for emergency medical.

First & Last Name	Date of Birth (Month / Day / Year)	Gender

**Our ability to accommodate is based on the information you provide to us in advance.** Do you, or anyone in your family, have special needs/requirements we should be aware of (including, but not limited to: wheelchair access, food allergies, learning disabilities, hearing/vision impairment, ADHD, Autism, behavioural issues, etc.)? **When completing this section, be sure to note the family member you are referring to.** Please provide complete details so we can be prepared so that you and your family can enjoy the program. (Attach additional pages if necessary.)

Listed below are the dates of each program scheduled for this summer. Indicate your first choice by placing a “1” in the appropriate box. If you are available and able to attend an alternate session, place a “2” in the box of your second choice. ***IF IT’S NOT POSSIBLE TO ATTEND AN ALTERNATE SESSION DUE TO WORK VACATION SCHEDULE, DO NOT NOTE A 2<sup>ND</sup> CHOICE. EARLY DEPARTURES FROM THE PROGRAM CANNOT BE ACCOMMODATED.***

- ☐ **SESSION #1 – Sunday, July 5<sup>th</sup> through Sunday, July 12<sup>th</sup> inclusive**
- ☐ **SESSION #2 – Sunday, July 12<sup>th</sup> through Sunday, July 19<sup>th</sup> inclusive**
- ☐ **SESSION #3 – Sunday, July 19<sup>th</sup> through Sunday, July 26<sup>th</sup> inclusive**



If your trip involves air travel, please specify the city from which you would like your initial flight to originate: \_\_\_\_\_

Please read and check off the important information below, and sign that you have read and understood the following:

- ☐ Each participant must contribute ***their*** time (vacation, personal leave, etc.) **NO LOST TIME, MILEAGE OR PER DIEM WILL BE PAID.**
- ☐ Plane tickets will be provided by the National Union if you are travelling more than 500 km one way.
- ☐ Your application must be signed by your Local Union PRESIDENT or FINANCIAL SECRETARY, to verify you are a member in good standing, and therefore eligible to attend the program.
- ☐ Participation in class is **mandatory** for **ALL** family members – including infants and children.
- ☐ Program runs from Sunday evening through to the following Sunday at approximately 11:00 am - early departures from the program cannot be accommodated.
- ☐ Unifor will provide, free of charge, food and lodging to each participant (and their family members) during your stay at the Education Centre.

***I have read and understood the above:***

Signature of Applicant: \_\_\_\_\_

Date of Application: \_\_\_\_\_

**Note to Local Union President/Financial Secretary:**

All members are eligible to attend the Family Education Program, providing they are Members in Good Standing. Paid Education Leave (PEL) is not required to attend this program as no lost time is paid, and members contribute their own time to attend (vacation, personal leave, etc.). Your Local will not be billed for any costs as a result of this applicant attending the Family Education Program.

I certify the Applicant to be a member in good standing.

\_\_\_\_\_  
(PLEASE PRINT)

\_\_\_\_\_  
(SIGNATURE)

☐ President ☐ Financial Secretary

Date: \_\_\_\_\_

Return completed applications **BEFORE FRIDAY, APRIL 17<sup>TH</sup>** to:

Michelle Barrett, Unifor Education Department  
e-mail: [education@unifor.org](mailto:education@unifor.org) fax: 416.495.6554  
mail: 205 Placer Court, Toronto, Ontario, M2H 3H9

***Selection of applicants will take approximately four weeks AFTER the deadline date. All applicants will be advised in writing of the disposition of their application. Questions can be directed to Michelle at [education@unifor.org](mailto:education@unifor.org) or 1-800-268-5763, extension 8484.***