

University of Regina Academic Assistants Union **CUPE 2419** AH 411.3, 3737 Wascana Parkway

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APPLICATION FOR MEMBERSHIP IN CUPE 2419 (Please send this section to the Union)

Name:			
Address:			-
			-
University Department/Unit:			
Phone : (home)		(office)	
Email address:			-
I hereby apply for member	ship in Local 2419	, Canadian Union of Public Er	mployees.
I commenced work on	(date)	in the Faculty of	
Department of		as a	(position title)
			(position title)
If approved as a member, I Employees and the Bylaws		the Constitution of the Canad	dian Union of Public
Signature:		Date:	