

# Standing Committee Application Form

|       |                |
|-------|----------------|
| Name: | Member Number: |
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|        |          |
|--------|----------|
| Local: | Chapter: |
|--------|----------|

|               |       |              |
|---------------|-------|--------------|
| Home Address: | City: | Postal Code: |
|---------------|-------|--------------|

|             |             |
|-------------|-------------|
| Home Phone: | Work Phone: |
|-------------|-------------|

|                 |
|-----------------|
| Personal Email: |
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|---|------------------------------|
| Union activity and Standing Committee experience: | What courses have you taken? |
|---|------------------------------|

What Committee(s) are you interested sit on?  
(Please list in order of preference)

*Please note: Applicants to the Young Activists  
Committee must be 30 years of age or younger  
to be considered.*

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| 1) |
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| 2) |
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Why do you want to serve on your  
selected committee?

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|  |
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Optional - Do you belong to an equity-seeking group?

(Please check all relevant boxes)

Yes  No  Prefer not to Answer

*If yes, please specify*

Women

LGBTQ+

Indigenous (First Nations, Inuit, or Métis)

Persons with disabilities (long-term or recurring physical, mental, sensory, psychiatric, or learning impairment)

Members of visible minorities (non-European American/non-white)

Newcomer, recent immigrant, or refugee

English as another language

Other, please provide equity-seeking group(s): \_\_\_\_\_

I belong to an equity-seeking group and prefer not to identify the group.

Were you previously a member of one of your preferred committees?

Yes  No Specify: \_\_\_\_\_

Is there anything you would like to add?

**Forms will be accepted until December 31, 2021.**

AUPE Headquarters, Executive Office  
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