



Should you have any questions regarding this form, please contact  
AUPE's Education Department at 780-930-3300 or 1-800-232-7284.

### Union Steward Withdrawal Form

**Member information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Member #:** \_\_\_\_\_ **Local/Chapter:** \_\_\_\_\_

As I feel I cannot fulfill the roles and responsibilities of the Union Steward position at this time, I would like to withdraw from my position as a Union Steward. I understand that if I would like to be a Union Steward again at a later date, I will need to follow the nomination process and my past education with AUPE will be reviewed and evaluated.

My reason(s) for discontinuing my position as a Union Steward are (check all that apply):

- Family/ Time Constraints
- Haven't been able to use my training at my worksite.
- Work resignation or retirement
- Other personal reasons

I confirm that I wish to discontinue my position as a Union Steward at this time.

\_\_\_\_\_  
Member signature Date

**Please return this for to AUPE's Education Department.**

**Fax: 780-930-3392 Toll Free Fax: 1-888-388-2873**

**For Office Use Only – Position End-Dated on:**

**Cc- MSO:      Local Chair:      Chapter Chair:      Member #:**