



PSAC NORTH REGION BASIC APPLICATION FORM

Please complete this form and return to:

PSAC Yellowknife Regional Office

FAX: 867.873.4295 or by Email: YelAdmin@psac-afpc.com

COURSE INFORMATION

Course name:
Course dates and location:

PERSONAL INFORMATION

Name:		
P.O. Box #:	City:	Postal code:
Home Phone #:		
Home E-mail:		
Work Phone #:		
Work E-mail:		
Component:	Local #:	PSAC ID#:

EMPLOYMENT INFORMATION

Employer:	
Position/Job title:	
Hours of work (i.e. Monday – Friday, 8:30-5:00):	
Supervisor's name:	Supervisor's Fax #:

If you are a shift worker, please include a copy of your official shift schedule

ACCESS AND DIETARY NEEDS

Do you need translations? No <input type="checkbox"/> Yes <input type="checkbox"/> (if yes) which language?
Do you have any disability? No <input type="checkbox"/> Yes <input type="checkbox"/>
Any other needs? (e.g. wheelchair access, sign language, etc.)
Do you have any dietary requirements or allergies? No <input type="checkbox"/> Yes <input type="checkbox"/>

SELF IDENTIFICATION (OPTIONAL)

<input type="checkbox"/> First Nations, Inuit, Metis	<input type="checkbox"/> Woman
<input type="checkbox"/> Person with disability	<input type="checkbox"/> Youth (35 and under)
<input type="checkbox"/> Racially Visible (i.e. African American, South Asian)	<input type="checkbox"/> Gay, Lesbian, Bisexual, Transgender

SMOKE FREE: ALL PSAC events, including this course, are smoke free.

SCENT-FREE: To assist members with environmental sensitivities, all courses are scent free.

If you are not sure of all your answers,

Please contact our office toll free: 1.800.661.0870 or 867.873.5670