



**Confidential Application
for UNW Membership**

I hereby make application to join the **Public Service Alliance of Canada**, the **Union of Northern Workers**, and such other PSAC Component Union to whose jurisdiction I may eventually be assigned.

The following information is confidential and will only be used in the interests of the member concerned.

I have been a UNW member before: Yes ____ No ____ Office Use Only:

Female ____ Male ____ Local # ____ Social Insurance Number: ____ - ____ - ____

_____ (Please print clearly)
Last Name First Name and Initial

_____ (Please print clearly)
Address City/Town Postal

_____ (Please print clearly)
Work Phone Home Phone

Date Hired _____ Term Ends (Term Employees Only) _____
DD / MM / YR DD / MM / YR

Employer _____ Department _____ Work Site _____

Employment Status: Casual ____ Permanent ____ Term ____ Seasonal ____

Signature Date

Voluntary Self Identification Form

The information requested below is strictly voluntary and will not be shared with any other organization, with the possible exception of the Public Service Alliance of Canada. This information will only be used to identify you as an Equity Group member.

- Are you an Aboriginal/Inuit/Metis person? Yes ____ No ____
- Are you racially visible? Yes ____ No ____
- Are you a person with any persistent/permanent impairment? Yes ____ No ____
- Are you gay or lesbian, bisexual or transgendered? Yes ____ No ____

Signature Date

Send completed form to **UNW Headquarters** - Ste 200, 5112 - 52nd Street, Yellowknife, NT X1A 3Z5,
or Fax to (867) 920-4448, or email mem@unw.ca . Be sure to visit our website at www.unw.ca .