

## **PSAC NORTH REGION**

North	BASIC COURSE APPLICATION	PPLICATION FORM
	Please complete this form and return to:	rn to:
	PSAC Iqaluit Regional Office Fax: 867-979-5517 email: shaimab@psac.com	
	COURSE INFORMATION	
COURSE NAME:		
COURSE DATES AND LOCATION:	<b>X</b> :	
	PERSONAL INFORMATION:	V:
NAME:		
ADDRESS:		
СІТҮ:	TERRITORY & POSTAL CODE:	
HOME PHONE NO:	WORK PHONE NO:	
HOME E-MAIL:	7.0	
WORK E-MAIL:		
COMPONENT:	LOCAL:	
PSAC/NEU ID #:	SIGNATURE:	
	EMPLOYMENT INFORMATION	ON
EMPLOYER:		
POSITION/JOB TITLE:		
HOURS OF WORK:		
(i.e. Monday-Friday, 8:30-5:00)		
If you are a shift worker please ENCLOSE A COP you are scheduled to work on the course date(s).	If you are a shift worker please ENCLOSE A COPY OF YOUR OFFICIAL SHIFT you are scheduled to work on the course date(s).	SHIFT SCHEDULE which CLEARLY shows
SUPERVISOR'S NAME:	SUPERVISOR'S FAX:	×
<u>S</u>	SPECIAL NEEDS AND SELF IDENTIFICATION	FICATION_
SPECIAL NEEDS	☐ Do you <u>need</u> translations? Which language?	Juage?
	☐ Any other needs: e.g. wheelchair access, sign language, etc.	ess, sign language, etc.
SELF IDENTIFICATION		
	Racially Visible Person with a disability	☐ Gay, Lesbian, Bisexual, Transgender
	COURSE ENVIRONMENT	
SMOKE FREE: All PSAC events, SCENT-FREE: To assist members	SMOKE FREE: All PSAC events, including this course, are smoke free SCENT-FREE: To assist members with environmental sensitivities, all courses will be scent free events.	s will be scent free events.