



# CUPE Nova Scotia Resolution Form

**Submitted By:**

Local: # \_\_\_\_\_

OR

CUPE NS Committee Name: \_\_\_\_\_

**CUPE Nova Scotia Will:**

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**Because:**

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**Signatures: (\*THIS IS REQUIRED)**

\_\_\_\_\_ OR \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2 Local Executive Members)

(2 CUPE NS Committee Members)



## Worksheet for Developing Resolutions

Step 1. Be clear about the impact or outcome you want to have by submitting the resolution. This will help you to write a clear and effective resolution.

*The change(s) we want to see as a result of submitting this resolution is / are ...*

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Step 2. Resolutions are to be submitted in the following format (see sample provided). Complete the sentences below to help you develop a clear and focussed resolution.

*CUPE National will:*

(This section is where you call for actions that you want the national union to take.)

1. 

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2. 

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*Because:*

(This section is where you give your reasons for the union to take these actions.)

1. 

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2. 

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3. 

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Submitted by \_\_\_\_\_ (your local number)

President (Name) \_\_\_\_\_

Recording Secretary (Name) \_\_\_\_\_



## SMART Tool for Strong Resolutions

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### **S - SPECIFIC**

*Be Specific!!*

Our intent needs to be specific and not vague.

This is too vague:

*“Educate members about privatization.”*

Clearly state what is to be achieved, by whom, where and when if relevant.

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### **M - MEASURABLE**

*Make sure your goal is measurable!*

How will you know if the outcome you want has been achieved?

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### **A - ACHIEVABLE**

*BE achievable!*

Your goals must be achievable, reasonable and do-able. You or your group need to have buy in; need to believe it's possible. Consider time and resources available.

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### **R - REALISTIC:**

*BE realistic! BE relevant!*

Be honest: Is the organization able to fulfill the request? What work would need to be stopped or put on hold to make this possible?

What is each of US prepared to do to help make this resolution a reality?

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### **T - TIMELY:**

How is your timing for this resolution? What is going on in the world, country, labour movement, CUPE, right now that makes this resolution urgent and timely, that will inspire others to act?

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# CUPE NS Constitutional Amendment Form

**Submitted By:**

Local: # \_\_\_\_\_

OR

CUPE NS Committee Name: \_\_\_\_\_

**CUPE Nova Scotia Will:**

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**Because:**

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**Signatures (\*THIS IS REQUIRED):**

\_\_\_\_\_ OR \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2 Local Executive Members)

(2 CUPE NS Committee Members)



# CUPE NOVA SCOTIA SOLIDARITY CONVENTION ASSISTANCE FUND

## APPLICATION FORM

Local Union Name and Number: \_\_\_\_\_ Province \_\_\_\_\_

Contact Person (name and title) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone (work) \_\_\_\_\_ (home) \_\_\_\_\_ (fax) \_\_\_\_\_

1. What is your Local Union's dues structure? \_\_\_\_\_
2. What are the average monthly Union dues paid by the members of your Local? \$ \_\_\_\_\_
3. The last per capita tax payment made to CUPE National and CUPE NS by your Local is for which month? National \_\_\_\_\_ CUPE NS \_\_\_\_\_
4. Is your Local's Trustees Report for the 12-month period (Jan – Dec) prior to Convention on file with the National Secretary-Treasurer?  yes  no  
Please include a copy with this application.
5. Based on current costs, what would be the estimated cost to your Local Union of sending a delegate to the Division Convention?
  - travel to/from (per National rate) \$ \_\_\_\_\_
  - hotel accommodation (3 nights x \$ per night) \$ \_\_\_\_\_
  - per diem/meal allowance (4 days x \$ per day) \$ \_\_\_\_\_
  - Registration Fee \$ \_\_\_\_\_
  - lost wages & benefit costs (3 days x \$ per day) \$ \_\_\_\_\_

**TOTAL ESTIMATED COST:** \$ \_\_\_\_\_
6. What are the average financial assets of your Local for the 12-month period January to December prior to Convention year? \$ \_\_\_\_\_

**Please enclose copies of the financial statements adopted by your Local's membership for 3 months prior to March 1<sup>st</sup>, 2020. March 20<sup>th</sup>, 2020 is the application deadline.**

\_\_\_\_\_  
Signature of President

\_\_\_\_\_  
Signature of Treasurer

\_\_\_\_\_  
Date



## **CUPE Nova Scotia Memorial Form**

At CUPE Nova Scotia Convention we always ask delegates to come to the floor and announce the name of a member or members from their Local that have passed away in the year between Conventions.

We do this to both remember and honour those members. This also provides a record of those members to be included into the Convention minutes.

A moment of silence is observed.

Recognizing that not all Local's attend Convention and to provide written record to the CUPE NS Executive Board in advance of Convention, we ask that the **CUPE NS Memorial Form** be filled out and submitted. All name(s) received of members who have passed away will be read at Convention.

**Submitting Local Name:** \_\_\_\_\_

**Submitting Local Number: #** \_\_\_\_\_

**Member's Name:** \_\_\_\_\_

Please return to the CUPE Nova Scotia Recording Secretary no less than 20 days before the start of CUPE Nova Scotia Convention, May 4<sup>th</sup>, 2020.

**Chris Melanson**  
**Recording Secretary**  
**CUPE Nova Scotia**  
**271 Brownlow Avenue, Dartmouth, NS, B3W 1W6**  
**Fax: 902-455-5915**



# CUPE NS CONVENTION

## Special Meal Request Form

Please list any special meal requests/needs for delegates attending the banquet. Please explain in detail the reasoning for such a request and what the request or need is for.

We will endeavour to accommodate those requests from individual delegates with special requirements within reason. **Please note that we need to have 20 days' notice of any request to plan with the hotel, therefore we need this information no later than May 4<sup>th</sup>, 2020.**

Please provide the delegate(s) name(s) and contact information and exactly what is being requested and the reason.

**Name**

**Contact Info/Phone Numbers**

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Special Request(s)/Needs:

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**Mail to:**

CUPE NS  
Secretary-Treasurer  
Sandra Trenchard  
19 Gerard's Lane, Sydney, Nova Scotia, B1P 3H8  
Phone: 902-564-1051 (h), 902-304-9821 (c)  
Email: [sandratrenchard19@gmail.com](mailto:sandratrenchard19@gmail.com)



**CUPE NOVA SCOTIA  
ANNUAL DIVISION CONVENTION  
CHILD CARE REQUEST**

**I WILL REQUIRE CHILD CARE FOR (PLEASE INDICATE):**

- SUNDAY, May 24, 2020**
- MONDAY, May 25, 2020**
- TUESDAY, May 26, 2020**
- WEDNESDAY, May 27, 2020**

**NAME:**

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**ADDRESS:**

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**TELEPHONE:**

**(work)**

**(home)**

**CHILD'S NAME:**

**AGE:**

**HEALTH PROBLEMS/  
MEDICATION/ALLERGIES:**

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Reimbursement of child care may be requested, no later than two (2) months from the close of Convention, to a maximum of \$40.00 per day, per delegate for a maximum of four (4) days in the event child care is not provided on-site at Convention.

**\*NOTE: On-site child care or family care will be provided during Convention hours provided sufficient need has been indicated. Applications for on-site must be received no later than 30 days prior to the Convention start date. Applicants must send completed request forms by the deadline to:**

Sandra Trenchard  
19 Gerard's Lane  
Sydney, Nova Scotia, B1P 3H8  
(902) 564-1051 (home) (902) 304-9821 (cell)  
[sandratrenchard19@gmail.com](mailto:sandratrenchard19@gmail.com)