

MEMBER FACILITATOR APPLICATION FORM

Name _____ Local No. _____

Address _____

City _____ Postal Code _____

Phone (Work) _____ Phone (Cell) _____

E-mail _____ Date _____

Self-identification

We are asking for the following information to assist in our continuing efforts to make our Member Facilitator Program more representative and more supportive of equity-seeking members. Providing this information is voluntary. This information will be kept confidential and only be seen by the interview committee.

Please select all that apply:

I am an Indigenous person (First Nations, Métis or Inuit)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to answer
--	------------------------------	-----------------------------	---

I am a Black person	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to answer
---------------------	------------------------------	-----------------------------	---

I am a racialized person	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to answer
--------------------------	------------------------------	-----------------------------	---

I am a person with a disability or disabilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to answer
---	------------------------------	-----------------------------	---

I am a member of the 2SLGBTQIA+ community (Two-Spirit, lesbian, gay, bisexual, trans, queer, Intersex, or other identities not listed here)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Prefer not to answer
---	------------------------------	-----------------------------	---

I prefer to self-describe _____

What is your gender? Gender refers to your current gender, which may be different from your sex assigned at birth and from what is indicated on your legal documents.

☐ Woman ☐ Man ☐ Intersex ☐ Trans ☐ Two-Spirit ☐ Non-binary/Genderqueer

I prefer to self-describe _____ ☐ Prefer not to answer

I am a young worker ☐ Yes ☐ No

What languages do you speak, read, and write, including sign language?

Are you able to obtain book-offs in order to facilitate outside your local?

☐ Yes ☐ No

Past and present roles/positions within CUPE and/or within my community:

CUPE Union Education workshops I have taken:

Other relevant workshops I have taken:

I want to be a Member Facilitator because:

The personal qualities, skills and abilities that I would bring to this role are:

The types of workshops I would be interested in facilitating and why:

Please attach letter(s) of support from staff or activists, such as your National Servicing Rep or other CUPE staff you have worked with, local leaders or activists, community activists.

Please return your completed application by **August 14, 2025** to CUPE Education
education@cupe.ca

mc/cope491