

Representative Election 2011/12

Name: _____ Membership Number: _____

Home Address: _____

Post Code: _____

Home Telephone Number: _____

Mobile Telephone Number: *(If different from above)* _____

Work Address: _____

Post Code: _____

Work Telephone Number: _____

Work Mobile Telephone Number: *(If different from above)* _____

Line Manager's Name: _____

Line Manager's Work Address: *(If different from above)* _____

Post Code: _____

Line Manager's Work Telephone Number: _____

Line Manager's Email Address: _____

I am seeking election/re-election for the following role(s) – please tick

Workplace

Union Learning

Safety

Equality

I require additional/refresher training *(For re-elected UNITE Representatives only)* YES No

If Yes, please specify: _____

Signature: _____

Please obtain the signatures of two UNITE members within your workplace:-

Name: _____ Membership Number: _____

Home Address: _____

Name: _____ Membership Number: _____

Home Address: _____

Please return the completed form to UNITE, 63 Macrae Road, Ham Green, Bristol, BS20 0DD.