

HEU Application Form

Workplace Stress Roundtable and Mental Health First Aid Basic 2023

YOUR NAME:

Workplace hazards such as unsafe work, workload, violence, bullying, harassment and workplace conflict can have a significant impact on workers' mental health and well-being.

This Workplace Stress Roundtable and Mental Health First Aid Basic is for Local Executives, Stewards and Joint OH&S Committee members. HEU wants to hear from you about this very important matter. What are you hearing from our members about their experiences with workplace stress and mental health? Are you being called upon to support members who are experiencing a decline in their mental well-being? How do you respond?

To assist you in this vital work, HEU is inviting you to participate in a roundtable on Workplace Stress Roundtable and Mental Health First Aid Basic. The in-person offering is scheduled over three (3) consecutive days and participants are expected to attend all three (3) days.

Workplace Stress Roundtable and Mental Health First Aid Basic:

Part I HEU - Workplace Stress Roundtable one (1) day and

Part II Mental Health Commission of Canada - MHFA Basic two (2) days, are scheduled to be facilitated on:

| WORKSHOP DATE | LOCATION | APPLICATION DEADLINE |
|-----------------------|---|----------------------|
| June 27 - 29, 2023 | Coast Hotel Kelowna | April 28, 2023 |
| October 17 - 19, 2023 | HEU Provincial Office Burnaby | August 4, 2023 |
| November 7 – 9, 2023 | Coast Victoria Hotel & Marina Victoria | September 8, 2023 |

Important Notes

Participants must attend all three days, schedule from 8:45 a.m. to 4:30 p.m. Application deadline: As listed in the above table. Incomplete applications will not be accepted.

SECTION A – PERSONAL INFORMATION

| Last Name: _ | First Name: | | | |
|-----------------------|---|---------|--|--|
| Address: | | | | |
| City: | Postal Code: | | | |
| Mailing Addr | ess (if different): | | | |
| Preferred Co | ntact Phone Number: | | | |
| Home Phone | :Cell: | | | |
| Personal Em | ail: (do not use the employer email) | | | |
| Job Title: | | | | |
| Employer: | Work Site Name: | | | |
| HEU Local (if | f known): | | | |
| Employment | Status: 🗌 Full-time 🗌 Part-time 🗌 Casual | | | |
| Region: | North Interior Vancouver Coastal (includes PHSA) Fraser Vancouver Island | | | |
| Do you self-i | dentify with any of the following equity groups? (check any that apply) | | | |
| Indigenou 2-Spirit, V | IS 2SLGBTQIA+ Worker with disabilities Worker of Colour Vomen, or Non-Binary Young Worker (33 years or younger) | | | |
| Emergency c | ontact Name: Phone: | | | |
| | any medical condition(s) or is there anything else that we should be aware of that bility to participate in this event? Yes No | t could | | |
| lf yes, please | briefly explain. (In some cases, a Physician's note may be required) | | | |
| | | | | |

Disclaimer: Personal information collected on this form, will be used to process this application and to update your contact information in HEU's membership database.

SECTION B – QUESTIONNAIRE

What union position(s) do you currently hold at your Local?

Please check any that apply:

| Chairperson | Yes No If yes, how long? |
|-----------------------|--------------------------|
| Vice-Chairperson | Yes No If yes, how long? |
| Secretary-Treasurer | Yes No If yes, how long? |
| Chief Shop Steward | Yes No If yes, how long? |
| Shop Steward | Yes No If yes, how long? |
| JOHS Committee Member | Yes No If yes, how long? |
| Other: | |

In your role (as a steward, for example), tell us about a situation where you supported a member experiencing a decline or crisis in their mental well-being at work.

Please Describe:

Select one workshop closest to you:

| WORKSHOP DATE | LOCATION | \checkmark |
|-----------------------|------------------------|--------------|
| June 27 - 29, 2023 | Coast Hotel | |
| | Kelowna | |
| October 17 - 19, 2023 | HEU Provincial Office | |
| | Burnaby | |
| Nevember 7 0 2022 | Coast Victoria Hotel & | |
| November 7 - 9, 2023 | Marina Victoria | |

Please note that this workshop is intended for Local Executives, Stewards and Joint OH&S Committee members who have not attended previous offerings of Workplace Stress Roundtable and Mental Health First Aid Virtual. We will not be covering how to care for patients / residents / clients who may be experiencing a decline in their mental health or a mental health crisis.

After the closing date of this workshop, you will be notified by email if your application is accepted and you will be required to apply for leave of absence for Union business.

Due to a limited amount of space, we may not be able to accept all applications. We will also notify unsuccessful applicants by email.

Signature of Applicant

Date

SECTION C – LOCAL ENDORSEMENT

This section must be filled out by your Local Chairperson or Secretary-Treasurer. Applicant cannot sign on their local's behalf or sign their own form.

Please note that an endorsement from your Local Chairperson or Secretary-Treasurer is required. If they are not able to sign the application in person, they can email their endorsement to **rprasad@heu.org** with the subject line "**Workplace Stress Roundtable and Mental Health First Aid Basic 2023**" and include the following in the body of the email: member's name, Chair/S-T name and position, as well as the name of the Local and their endorsement. Emailed endorsements must be received by the registration deadline.

HEU Member's Name: _____

HEU Local: _____

Local Chairperson/Secretary-Treasurer (Print)

Signature

Date: _____

Submit your application form by email, fax or mail:

| EMAIL: rprasad@heu.org | FAX: 604-739-1510 | Mail: HEU Provincial Office |
|------------------------|-------------------|-----------------------------|
| | | 5000 North Fraser Way |
| | | Burnaby, BC V5J 5M3 |
| | | Attention: Education Dept. |

DATE SENT: ______ # OF PAGES: _____