

# Application



## Cultivating Space – Women of Colour Workshop

**Date:** April 2 - 3 September 10 - 11, 2025

**Location:** Lower Mainland **Registration Deadline:** February 19, 2025

**Your Name:** \_\_\_\_\_

**Please note**

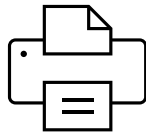
Incomplete applications will not be accepted.

**Please ensure the email address on your application is current.**

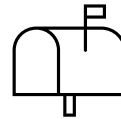
Submit your application form by email, fax, or mail.



**EMAIL:**  
[Education@heu.org](mailto:Education@heu.org)



**Fax:**  
604-739-1510



**HEU Provincial Office**  
5000 North Fraser Way  
Burnaby, BC V5J 5M3  
Attention: EDUCATION

**Date Sent:** \_\_\_\_\_ **# of pages:** \_\_\_\_\_

## SECTION A – PERSONAL INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt/Suite: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Personal Email (do not use work email): \_\_\_\_\_

Employer: \_\_\_\_\_ Worksite Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ HEU Local (if known): \_\_\_\_\_

Employment Status:  Full-time  Part-time  Casual

Region:  North  Interior  Vancouver Coastal (includes PHSA)  
 Fraser  Vancouver Island

Do you self-identify with any of the following equity groups? (Check any that apply)

- Indigenous  2SLGBTQIA+  Worker with disabilities  Worker of Colour  
 2-Spirit, Women or Non-Binary  Young Worker (35 years or younger)  
 Older Persons (55 years or older)

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you have any medical condition(s) or is there anything else that we should be aware of that could impact your ability to participate in this event?  YES  NO

If yes, please briefly explain. (In some cases, a Physician's note may be required)

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Do you have an accessibility requirements (i.e. ergonomic chair)? If so, please specify:

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## SECTION B – QUESTIONNAIRE

1. Why are you interested in participating in the Cultivating Space: Women of Colour Leadership course?

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2. Are you active or involved in any community groups, coalitions, political organizations, or equity groups in your community (i.e., Women’s Organizations, Indigenous community organizations, 2SLGBTQIA+ advocacy groups, Cultural Advisory Communities, Council of Canadians etc.)? If yes, please describe your involvement.

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3. Below is the workshop schedule and locations, once applicants have been selected, **you are required to attend all four days:**

WORKSHOP DATE	LOCATION
April 2 & 3, 2025	Inn at the Quay – New Westminster
September 10 & 11, 2025	HEU Provincial Office

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

*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.*