

Application



INTRODUCTION TO SHOP STEWARDING 2026

Date: Multiple Dates

Location: In-Person and Online

Application Deadline: February 10, 2026

Your name: _____

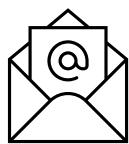
Please note: Incomplete applications will not be accepted.

After the registration deadline, 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.

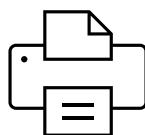
An endorsement from your local chairperson or secretary-treasurer is required. If they are not able to sign the application in person, they can email their endorsement to education@heu.org with the subject line "Intro Shop Steward Level 1" and include the following in the body of the email: member's 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.

Please ensure the email address on your application is current.

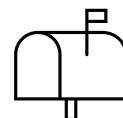
Submit your application form by email, fax, or mail.



EMAIL:
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)

Do you have an accessibility requirement? If so, please specify:

SECTION B – WORKSHOP INFORMATION

Workshop Choice

Please indicate which workshop you are applying for (Please select one only). The option you choose should be within the region where you live. A full list of future locations for 2026 is available on the HEU website. Please check the HEU website and your local correspondence to apply for future sessions of this workshop.

Workshop Date	Location	
April 21-23, 2026	Kelowna	<input type="checkbox"/>
May 12-14, 2026	Victoria	<input type="checkbox"/>
June 23-25, 2026	Online (all regions)	<input type="checkbox"/>

Signature of Applicant

Date

SECTION C – ENDORSEMENT

This section to be filled out by local chairperson or secretary-treasurer.

HEU Members Name: _____

HEU Local: _____

If local leadership are not able to sign the application in person, they can email their endorsement to education@heu.org with the subject line “Introduction to Shop Stewarding” 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.

Applicants cannot sign on their local’s behalf.

Local Chairperson/Secretary-Treasurer
(please print)

Signature

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.