



Name: \_\_\_\_\_ Local Number: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_

Union Position (if applicable): \_\_\_\_\_  
\_\_\_\_\_

OPSEU/SEFPO Committee – designated applicant #  
\_\_\_\_\_ (# to be assigned by Equity Unit)

Please E-mail your completed application form no later than **5:00 PM on January 31<sup>st</sup>, 2023** to:  
[equity@opseu.org](mailto:equity@opseu.org)

1. Please circle your OPSEU/SEFPO region:    1    2    3    4    5    6

1. Please indicate what Racialized group you belong to from the list below:

- Black  Yes  No
- Asian  Yes  No
- South Asian  Yes  No
- Other \_\_\_\_\_

2. What is your understanding of the work of the Coalition of Racialized Workers Committee?

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3. What is your understanding of Racialization?

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4. Please list your past and current union activities if applicable:

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5. Please list your past and current community activities if applicable:

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6. What issues have you identified as barriers that prohibit the full participation of racialized people within OPSEU/SEFPO in particular and the broader society in general?

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7. How have the issues you identified above prevented full participation of Racialized workers within OPSEU/SEFPO?

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