

Name:	Local Number:
Address:	
	_ Work Phone:
Home Email Address:	
Union Position (if applicable):	
OPSEU/SEFPO Committee – designated appli	
	(# to be assigned by Equity Unit)
Places E mail your completed application for	m no later than 5:00 PM on Sentember 20th 2022

Please E-mail your completed application form no later than **5:00 PM on September 29th, 2023 to:** equity@opseu.org

Please circle your OPSEU/SEFPO region: 4 6 7

1.	Pleas	se indicate wha	at Racial	ized group you	u belong to from the list below:
		Black	□ Yes	□ No	
	•	Asian	□ Yes	□ No	
	•	South Asian			
	•	Other	□ res	□ NO	
2.	Wha	t is your under	standing	of the work of	the Coalition of Racialized Workers Committee?
3.	Plea	se list your pa	st and c	urrent union ac	ctivities.
4.	Plea	se list your pas	st and cu	rrent communt	ty activities if applicable:

5.			ala and harmal real Age of
	workplace, th	ne union, and our society as a wh	ole, and what solution(s) if any can you offo
	resolve it?		
6.	Which of the	following working groups do see	yourself participating in and why?
6.		following working groups do see	yourself participating in and why? - Membership Development
6.	- Board E		
6.	- Board E - Organiz	Equity Committee	- Membership Development
6.	- Board E - Organiz - Commu	Equity Committee	- Membership Development- Education, Evolving, Change
6.	- Board E - Organiz - Commu	Equity Committee zing, Mobilization, Elections unications	- Membership Development- Education, Evolving, Change
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7. Any other information you would want to share about why you would want to work with CORW?