

MEMBER OF THE YEAR NOMINATION FORM

Please return to the UPSE Office: 4 Enman Crescent, Charlottetown PE C1E 1E6 Fax:(902) 569-8186 Email: peiupse@peiupse.ca

I. Please provide the following information on the member you wish to nominate for the UPSE "Member of the Year Award':

UPSE "Member of	the Year Awa	ra:		
Name				
Address				
Work Site				
UPSE Local				
# of Years an UPSE Member				
II. Member's Invo	lvement in UP	SE:		
Please check ($$)	the UPSE activi	ties this member	has been or is cu	rrently involved in:
UPSE Steward			Bargaining Team	
UPSE Chief Steward			Committees	
Local Director			Local Executive	
Convention Delegate			NUPGE Convention Delegate	
Other participation	not listed, please	e indicate:		
III. Member's Edu	cation:			
Information on Me	mber's Education	on will be provid	ed by the UPSE o	office to Committee
IV. Remarks or co	mments related	l to nomination :	and member's a	ctivism in UPSE:
		"OC 11) 1 "	
		"Office Use (Only"	
Positions	Education	Attendance	Assistance	Activism