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PSAC NORTH REGION BASIC APPLICATION FORM

Please complete this form and return to: **PSAC Iqaluit Regional Office**

Fax: 867-979-5517 or by Email: Iqaluit-Ro-Admin@psac-afpc.com

COURSE INFORMATION									
COURSE NAME:									
COURSE DATES AND LOCATION:									
PERSONAL INFORMATION:									
NAME:									
ADDRESS:									
CITY:			TERRITORY:				POSTAL CODE:		
TELEPHONE:	ном	NE:	WORK:			OTHER:			
HOME E-MAIL:	-								
WORK E-MAIL:									
COMPONENT:		LOCAL:			PSAC/NEU ID #:				
SIGNATURE:									
EMPLOYMENT INFORMATION									
EMPLOYER: POSITION/JOB TITLE:									
(i.e. Monday-Friday,	8:30)-5:00)		•					
SUPERVISOR'S NAME:		SUPERVISOR'S F			ERVIS	SOR'S FAX:			
If you are a shift worker please ENCLOSE A COPY OF YOUR OFFICIAL SHIFT SCHEDULE which CLEARLY shows you are scheduled to work on the course date(s).									
ACCESS AND DIETARY NEEDS									
Do you need translations? Which language?									
Do you have a disability?									
Any other needs: e.g. wheelchair access, sign language, etc.									
Do you have any dietary requirements or any allergies?									
SELF IDENTIFICATION									
		First Nations, In	uit, Metis			Woma	nan		
		Racially Visible				Yout	th		
		Person with a di	sability			Gay,	, Lesbian, Bisexual, Transgender		
COURSE ENVIRONMENT									
SMOKE FREE: All PSAC events, including this course, are smoke free									
SCENT-FREE: To assist members with environmental sensitivities, all courses will be scent free events.									

If you are not sure of all your answers or if you want an Inuktitut application form please contact our office toll free: 1-866-268-7097 or in Iqaluit 979-7430