



Date: _____

UNIFOR WOMEN'S SKILLED TRADES AND TECHNOLOGY
AWARENESS PROGRAM

LOST TIME WAGE VERIFICATION FORM

R.R.#1, Port Elgin, Ontario NOH 2C5

Phone: 519-389-3215 / 1-800-265-3735 Fax: 519-389-3845

PLEASE PRINT CLEARLY

SIN: (For Payroll/Expenses) _____ LOCAL : _____ UNIT: _____

Given Name: _____ UNIT/COMPANY NAME: _____

Preferred Name: _____ Phone (Res.): (_____) _____

Last Name: _____ Phone (Cell): (_____) _____

Address: _____ Date of Birth (mm/dd/yyyy): _____

City: _____ Clock # _____ Dept. _____
Gender: *Please circle* **Male** **Female**

Province: _____ Emergency Contact: _____

Postal Code: _____ Phone: _____

Email address: _____

Smoker: *Please circle* **Yes** **No** Roommate Request: _____

IF ON SALARY CONTINUATION DO NOT COMPLETE (If you continue to receive salary directly from employer)

Current Lost Time Rate: \$ _____ (AS OF (Date) _____) + COLA: \$ _____ = Total Hourly Rate: \$ _____

Expected Rate Change: (when) _____ How Much: \$ _____

Hours/Pay Period: _____ Aft. Shift Rate: \$ _____ Night Shift Rate: \$ _____

Skilled Trades? *Please circle* **Yes** **No** Vacation Pay Percent (if applicable): _____ %
Only required if any Loss of Vacation While Attending the Program

Changes in hourly rate will not be made without verification from pay stub or Local Union. We encourage direct deposit to avoid postal delay - Please attach a void cheque.

Applicant Signature: _____ Date Completed: _____

Local Union Verification: _____ (signature)
_____ (print name)
_____ (Title: President, Financial Secretary or Chairperson)



SKILLED TRADES UNION EDUCATION ROOMING REQUEST

Due to space limitations in Port Elgin you will be sharing your room. If you have a preferred rooming partner, please fill out the following form or a rooming partner will be automatically assigned for your stay.

Course Date: _____
Participant's Name: _____
Local: _____
Rooming Partner: _____

Thank you for your attention to this matter please return this form with your wage verification form.

**PLEASE E-MAIL TO amy.buckley@unifor.org IN ADVANCE OF
COURSE DATES**