**Steward/H&S Rep/WPC Nomination Form 2024-2025**



Name ………………………...................................................…...........……………………

Membership No………………………...................................................…...........………….. Workplace address.............................................................................................................

Telephone No.............................................

Home Address....................................................................................................................

Telephone No..................................…................................................................................

Email............................................................................................................................... Name of Employer or DCC Department ..........................................................................

Line Manager (to be informed of your appointment)………………………………………….

Please tick your choice: Steward

Health & Safety Rep

Workplace Contact

Signature of two nominees (for Stewards and Health & Safety Reps ONLY)

Signature 1 .............................................Membership No…………………………..............

Print name ………………………………….…....................................................................

Signature 2 ..............................................Membership No………………………...........….

Print name ………………………………….…....................................................................

Please list UNISON training/courses undertaken Date:

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…………………………………….………………….. .................................

After your appointment you will receive the following mail please indicate where you wish to receive it:

|  |  |  |
| --- | --- | --- |
| * Activist mailing from branch | home | work |
| * Activist mailing from region | home | work |
| * UNISON Focus magazine | home | work |

Please return this form to: UNISON Devon County Branch, Larkbeare House, Topsham Road,

Exeter, EX2 4NG by Wednesday 6th March 2024

1