



OCCUPATIONAL HEALTH and SAFETY (OHS) REPRESENTATIVE for AREA 04

1. I would like to be considered for appointment as a BCGEU OHS Representative:

Name:
Home/Cell Phone:
Home Email:
Home Address:
Employer:
Employer Manager or Designate:
Work Phone:
Work Address:
Work Email:

2. I work at the following worksite/program: (please include address)

3. My classification is:

4. I have taken the BCGEU Basic OHS course previously: ☐ Yes ☐ No

5. Reasons I would like to become a BCGEU OHS Representative:

**Please include any related knowledge and/or experience in Occupational Health and Safety and/or as a Union Representative (steward)*
