APPENDIX B – UNION MEMBERSHIP FORM UNIT B: FLOOR FELLOWS





www.amusemcgill.org

TO BE COMPLETED BY THE EMPLOYEE. All fields must be completed.

Completed, ORIGINAL form must be sent to the Association of McGill University Support Employees (AMUSE-PSAC) before the employee begins their first shift of work. See address below.

CONTACT INFORMATION:	
First name:	Last name:
Address:	
Postal Code:	Phone number:
Non-McGill Email Address:	
WORK INFORMATION for Floor Assigned Building:	Fellow Position:
Are you working additional position	ns in your role (ie Assistant Director, Council Advisor, etc)?
Contract length: from	to
I, the undersigned, freely give respect the policies, rules and	my adhesion to the Public Service Alliance of Canada/AMUSE. I will decisions of the association.
Signature:Original: Union	Date:
Please send or deliver all Union I Employees at:	Membership Forms to the Association of McGill University Support

515 ave des Pins Ouest Room #224 Montreal, QC H2W 1S4