

## Course Details

The closing date for the course is \_\_\_\_\_

Course Title \_\_\_\_\_

Course date (s) \_\_\_\_\_

### Your Details

Surname \_\_\_\_\_

Preferred first name \_\_\_\_\_ m/f \_\_\_\_\_

**Membership no.** \_\_\_\_\_

Branch \_\_\_\_\_

Service (e.g. health) \_\_\_\_\_

Address for correspondence  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Employer \_\_\_\_\_ Dept \_\_\_\_\_

Position \_\_\_\_\_  
 \_\_\_\_\_

Telephone: Work \_\_\_\_\_

Home \_\_\_\_\_

e-mail: \_\_\_\_\_

### Paid Release

Do you need paid release from work? Yes  No

Is your branch seeking paid release for you Yes  No

### UNISON Activities

If you hold any positions, what are they and when from?  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you attended any other courses? Yes  No

If yes, give details  
 \_\_\_\_\_  
 \_\_\_\_\_

Why would you like to do this course?  
 \_\_\_\_\_  
 \_\_\_\_\_

### Accommodation/Facilities

Do you require a accommodation? Yes  No

Do you have special dietary needs? Yes  No

Do you require disabled facilities? Yes  No

Do you need assistance with child/dependent care to attend courses? Yes  No

If you have answered yes to any of the above questions please give details  
 \_\_\_\_\_  
 \_\_\_\_\_

### Monitoring

To help us work towards fair representation, please answer the following questions:

Do you identify yourself as being (please specify)

Black  White  Other

Are you disabled? \_\_\_\_\_ Yes  No

Are you a part time worker? \_\_\_\_\_ Yes  No

All applicants must ask their Branch Secretary/ Branch Education Secretary to complete this.  
 Any problems should be referred to the Regional Education Officer on 0191 245 0800

**Important Note: Please ensure Membership No's. of all applicants are shown on all application forms to assist with administration.**

**This application is supported by the Branch:**

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

Branch Position \_\_\_\_\_

All Branches will be invoiced as follows for this course:

**Residential weekend £95 per person**

**Non residential Weekend £50 per person**

**Day School No charge**

**National Courses Special rates apply**

If you cannot attend the course and need to cancel at short notice, please let the regional Education Officer know. Your branch could be liable for a charge if you do not.

**Applicant's Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Please return this form to:  
 UNISON Regional Office, FREEPOST NT765, Newcastle upon Tyne, NE1 1BR**