

## AREA COURSE REQUEST FORM

**We require 6-8 weeks notice** (to book the Discussion Leader, prepare and ship materials and for the local to book off it's members with their employer.)

Request Date	
Local #	
Local Address	
Province	
Local President	
Contact Person	
Mobile Number	
Email	
Course Name	
	<b>NOTE:</b> If you are requesting a <b>Health &amp; Safety</b> program, please specify if this course will be for participants from: <input type="checkbox"/> Federal Jurisdiction <input type="checkbox"/> Provincial Jurisdiction
Course Location (City or Address)	
Can the course be held at your local office/hall?	
# of participants (min 15 - max 24)	
Course Start Date (1 <sup>st</sup> Choice)	
Course Start Date (2 <sup>nd</sup> Choice)	

Completed request forms to be submitted to [areaschools@unifor.org](mailto:areaschools@unifor.org)