

Education Nomination Form - Branch Secretary Stage 1 Course FETAC Level 5 October 18th, 19th, 25th, 26th & 27th 2011

This form should be completed by newly elected Branch Secretaries.

About the Delegate:

Delegate Name:

Staff Number:

Branch:

Telephone Number Work:

Mobile Number:

e-mail address:

Company Name & Address:

Home Address:

Have you attended any previous union education courses? Yes/No
(If yes, please provide detail)

Expectation:

Please let us know what expectations you have of the course

Please note where possible you must give at least two weeks notice for course cancellation.

Please return this nomination form as soon as possible.

Please return to:

Carol Scheffer, CWU, Exchequer Chambers, 19-23 Exchequer Street, Dublin 2.

Signature of Participant:

Date: