COURSE APPLICATION FORM

UNISON
East Midlands

Name	Gender Male ❒ Female ❒
Home address	Branch
	Position in branch
	Membership number
Daytime phone number	Mobile phone number
E-mail address	
Emergency contact name and tel. number	
Course title	
Course code	Course date(s)
Course venue / location (town)	
Dietary requirements – please give details	
Special requirements – please give details (e.g. disabled parking, large print, dyslexia, etc.)	
I wish to claim care allowance for a child/adult dependant for additional costs incurred ❒	
Signature of applicant Signed …… Date …….	
To be completed by your Branch Education Co-ordinator / Branch Secretary I confirm the applicant has branch approval to attend the above course. Signed …… Date ……. *Branch Education Co-ordinator / Branch Secretary (*please circle as appropriate)	
Once fully complete and countersigned, please return this form to the UNISON Learning & Member Development Team, UNISON Regional Centre, Vivian Avenue, Nottingham NG5 1AF Please note, your application may be declined if you do not return a completed Proportionality and Fair Representation form in addition to this application form. To receive an acknowledgement of receipt via e-mail, please tick ❒ N.B. The information you provide and the record of your attendance of UNISON education courses may be shared within UNISON to ensure that membership and branch records are accurate and up to date. Course information may also be used for statistical purposes.	

PROPORTIONALITY AND FAIR REPRESENTATION FORM

UNISON East Midlands

Name ……..... **Membership Number** .....……..

Branch .....……. **Course Title** .....……..

Please tick the boxes that apply

1. Which of UNISON's service groups are you in?

( ) Local Government ( ) Health Care ( ) Higher Education
( ) Energy ( ) Police & Justice ( ) Community
( ) Water, Environment and Transport

2. Are you? ( ) Female ( ) Male

3. How would you describe your ethnic origin?

4 Bangladeshi ( ) 3 Chinese ( ) 5 Indian ( ) 6 Pakistani ( )
15 Asian UK ( ) 8 Asian Other ( ) 0 Black African ( ) 1 Black Caribbean( )
14 Black UK ( ) 2 Black Other ( ) 12 White UK ( ) 11 Irish ( )
13 White Other ( )

4. UNISON has self-organised groups for women, lesbian, gay, bisexual and transgender, black, and disabled members. In which, if any, of the groups do you participate?

Women members ( ) Black members ( ) Disabled members ( )
Lesbian, gay, bisexual & transgender members ( )

5. What is your age group? ( ) 16 - 26 ( ) 27 - 39 ( ) 40 - 49 ( ) 50+

6. Which UNISON subscription band are you in?

Band	Yearly income £	Band	Yearly income £
( ) A	Up to 2,000	( ) B	2,001 to 5,000
( ) C	5,001 to 8,000	( ) D	8,001 to 11,000
( ) E	11,001 to 14,000	( ) F	14,001 to 17,000
( ) G	17,001 to 20,000	( ) H	20,001 to 25,000
( ) I	25,001 to 30,000	( ) J	30,001 to 35,000
( ) K	35,000 +		

7. How many hours per week do you work?

( ) Less than 16 ( ) 16-29 ( ) 30-34 ( ) 35 or more

8. In which occupational group is your job?

( ) Managers ( ) Technical
( ) Professional ( ) Personal and caring services
( ) Administrators ( ) Clerical and secretarial
( ) Other non-manual ( ) Other manual
( ) Other occupation (please specify) …….

UNISON is committed to achieving fair representation and proportionality in all its structures. The Education and Training Committee asks each course applicant to fill in this form to assist us in achieving this aim. This form is used to monitor and evaluate participation in regional education and branch training opportunities. Thank you for your co-operation. Please note, you do not have to disclose this information to your Branch. You may prefer to photocopy this form and send it direct to: UNISON, Learning & Member Development Team, Vivian Avenue, Nottingham NG5 1AF.