

**APPENDIX B – UNION MEMBERSHIP FORM
UNIT B: FLOOR FELLOWS**



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 Fellow Position:

Assigned Building: _____

Are you working additional positions in your role (ie Assistant Director, Council Advisor, etc)?

Contract length: from _____ to _____

I, the undersigned, freely give my adhesion to the Public Service Alliance of Canada/AMUSE. I will respect the policies, rules and decisions of the association.

Signature: _____ **Date:** _____

Original: Union

Please send or deliver all Union Membership Forms to the Association of McGill University Support Employees at:

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