

BC Federation of Labour Standing Committee Nomination Form 2024-2026 Term

Please return the completed form to: bcfed-ea@bcfed.ca.

Date:		
Please submit one form for each nominee. please check the boxes below as appropria		inated for more than one committee
Name of nominee:		
Union position:	Pronouns:	
Nominee's union/organization:	Local:	
City:	Postal code:	
Email:		
Secondary email (if applicable):		
Work number:	Cell number:	
Is this nominee replacing another member	r on the committee? Yes	□ No □
If yes, please list name of member being r	eplaced:	
Please indicate the name of the committee(s) a	nd the nominee's status by mark	ing the appropriate box [x].
COMMITTEE NAME	REGULAR MEMBER	ALTERNATE MEMBER
Artificial Intelligence (AI)		
Climate Justice and Jobs		
Constitution and Structure		
Human Rights		
Indigenous Rights & Reconciliation		
Occupational Health & Safety		
Political Action		
Organizing		
Women and Gender Rights		
Young Workers		
Affiliate Officer's name:		
Affiliate Officer's signature:		