CONFIDENTIAL EQUITY MEMBER SELF IDENTIFICATION FORM

The information requested below is **strictly voluntary** and will only be used to identify you as an Equity Group member for the purpose of confirming your eligibility for UNW/PSAC Equity related conferences, programs, communications, and Equity Vice President elections. This information will NOT be shared with employers, or other UNW members.

First Name(s):			
Last Name:			
Community:			
Employer:		Personal Phone:	
Personal email:			

I identify as:
(Please check all that apply)

- ☐ Indigenous (First Nations, Inuit, or Métis)
- ☐ Racialized
- ☐ A person with a disability
- ☐ 2SLGBTQIPA+

Applicant Signature _____ Date _____

SEND COMPLETED FORM TO:

MAIL: Suite 400 – 4910 53 Street, Yellowknife NT, X1A 1V2
FAX: 867-920-4448 | **EMAIL:** mem@unw.ca

To update your existing member information, including any name changes, please fill out and submit the **Change of Name and Contact Information form**, which is available on our website at: www.unw.ca/join-unw