

COWICHAN VALLEY TEACHERS' UNION

201-394 Duncan Street

V9L 3W4

Ph: 748-2251

Fax: 748-5243

**CVTU REPRESENTATIVE ON DISTRICT COMMITTEE
APPLICATION FORM**

*Please forward this application to the CVTU office at 250-748-5243(fax) or email at
cowichandta@shaw.ca*

Date: _____

Committee applying for: _____

Surname _____ First Name _____

School or Work Site _____

Teaching Assignment _____

CVTU/BCTF experience, if any (including LSA and/or Provincial Specialists'
Association affiliations):

Please give a general statement about your approach to the issues you see facing this
committee:

I agree to abide by the federation's policies regarding federation representatives to district
committees.

Signature