



SEAFARERS' INTERNATIONAL UNION OF CANADA

280 - 9300 HENRI-BOURASSA WEST, MONTREAL, QC H4S 1L5

APPLICATION FOR ADMISSION

(PLEASE PRINT)

NAME (LAST)		(FIRST)	(MIDDLE)	SOCIAL INSURANCE NUMBER	
ADDRESS		(STREET)	(APT.)	(CITY)	
(PROV.)		(POSTAL CODE)	TELEPHONE ()		E-MAIL
DATE OF BIRTH	HEIGHT	WEIGHT	HAIR COLOUR	EYE COLOUR	
MONTH / DAY / YEAR					
CANADIAN CITIZEN YES <input type="checkbox"/> NO <input type="checkbox"/>		NATURALIZED YES <input type="checkbox"/> NO <input type="checkbox"/>		DO YOU HOLD A VALID PASSPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>	
WERE YOU EVER A MEMBER OF THE SIU? YES <input type="checkbox"/> NO <input type="checkbox"/>			IF YES, UNION NO.		

EDUCATIONAL BACKGROUND

LAST SCHOOL ATTENDED	LAST GRADE COMPLETED	TRADE SCHOOL
DID YOU RECEIVE A HIGH SCHOOL EQUIVALENCY DIPLOMA? YES <input type="checkbox"/> NO <input type="checkbox"/>	IF YES, WHERE	WHEN
LIST ANY SPECIAL TRAINING YOU HAVE HAD, MACHINES YOU CAN OPERATE, OR ANY SPECIAL APTITUDE YOU MAY POSSESS		
IN WHICH LANGUAGE DO YOU PREFER TO RECEIVE COMMUNICATIONS FROM THE UNION? ENGLISH <input type="checkbox"/> FRENCH <input type="checkbox"/>		

EMPLOYMENT RECORD

COMPANY NAME AND LOCATION	SPECIFIC JOBS HELD	FROM	TO
1)			
2)			
3)			

**I AGREE TO ABIDE BY THE CONSTITUTION OF THE SIU, AND THE REGULATIONS, ACTIONS AND DIRECTIONS OF THE EXECUTIVE BOARD.
I DECLARE THAT THE STATEMENTS ON THIS APPLICATION ARE TRUE.
FALSE INFORMATION GIVEN WILL CONSTITUTE GROUNDS FOR EXPULSION FROM THE SEAFARERS' INTERNATIONAL UNION OF CANADA.**

DATE

SIGNATURE

FOR OFFICE USE ONLY

DUES/PROBATIONARY FEES PAID \$	RECEIPT NO.	PORT	APPLICATION TAKEN BY
DATE SHIPPED	VESSEL	COMPANY	
APPROVED BY H.Q. YES <input type="checkbox"/> NO <input type="checkbox"/>	DATE	H.Q. REPRESENTATIVE	(SIGNATURE)