

SEAFARERS' INTERNATIONAL UNION OF CANADA

200 - 3131 Pitfield Blvd. Saint-Laurent, QC H4S 1N3

APPLICATION FOR ADMISSION

(PLEASE PRINT)												
NAME (LAST)		(FIR	ST)	(MIDDLE)				SOCI	SOCIAL INSURANCE NUMBER			
ADDRESS (STREET)				(APT.) (CITY)								
(PROV.)	(POSTAL CODE)			TELEPHONE ()					E-MAIL			
DATE OF BIRTH	HEIG	ìΗΤ		WEIGHT				HAIR COLOUR		EYE COLOUR		
CANADIAN CITIZEN YES NO			NATUF	RALIZED YES		DO YOU			HOLD A VALID PASSPORT? YES NO			
WERE YOU EVER A MEMBER OF THE			IU?	IF YES, UNION			N NO.					
		E	DUCA	TIONAL	BACK	GRO	UND					
LAST SCHOOL ATTENDED			LAST GRADE COMPLETED					TRADE SCHOOL				
DID YOU RECEIVE A HIDIPLOMA?	ICY IF YES, WHERE WHEN							WHEN				
LIST ANY SPECIAL TRA YOU MAY POSSESS	INING	YOU HAVE	E HAD, M	IACHINES \	OU CAN	N OPE	RATE,	OR ANY	SPECIAL	APTITU	DE	
IN WHICH LANGUAGE I	00 YO	U PREFER	TO REC	CEIVE COM	MUNICA	TIONS	FROM	/ THE UN	NION? EN	NGLISH	FRENCH	
			EMF	PLOYME	NT RE	CORI	D					
COMPANY NAME		SPECIFIC JOBS HELD)	FROM TO		то			
1)												
2)												
3)												
I AGREE TO ABIDE BY OF THE EXECUTIVE E I DECLARE THAT THE FALSE INFORMATION THE SEAFARERS' INT	BOARE STAT GIVE). EMENTS C N WILL CO TIONAL UI	ON THIS	APPLICATI TE GROUN	ON ARE	TRUE				ND DIRE	ECTIONS	
			FOF	ROFFICE	USE	ONL	Y					
DUES/PROBATIONARY FEES PAID \$	REC	EIPT NO.		PORT				APPLICATION TAKEN BY				
DATE SHIPPED	V	'ESSEL				COM	1PANY					
APPROVED BY H.Q.	·				H.Q.). REPRESENTATIVE			(SIGNATURE)			