



Fax # (780) 482-9520
Phone# (780) 488-1266

Attention: Shelly

This Fax is to inform you that:

(Name) _____

(Address) _____

Will be attending
(School, Year & Trade) _____

School Dates: **from:** _____ **to:** _____

Social Insurance Number (S.I.N.#): _____

Present Employer: _____

Date of Lay Off to attend School: _____

Date returning to work: (if returning) _____

Signature: _____ Phone: _____

*****NOTE: In order to receive a two month non-working dues credit you must hand in this form within 5 days of starting class. The credit may not be applied immediately by Local 488 therefore it is your responsibly to ensure your dues are up to date in order remain in good standing.*****