**CANADIAN UNION OF POSTAL WORKERS**

**LONDON LOCAL 566**

**920 Leathorne St, Units 3 & 4**

**London, Ontario N5Z 3M5**

**Tel : 519-672-4417 Website:** [**www.londoncupw.ca**](http://www.londoncupw.ca) **Fax: 519-672-9420**

**Email:** **sectreas@londoncupw.ca**

REQUEST FOR UNION DUES WAIVER

IN ACCORDANCE WITH SECTION 1.19 OF THE CUPW NATIONAL CONSTITUTION, I HEREBY REQUEST TO HAVE MY UNION DUES WAIVED BY THE LONDON LOCAL

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HRID # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ POSTAL CODE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DURATION OF REQUEST FROM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TO \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

REASON FOR REQUEST

(SEE SECTION 1.19 ON REVERSE)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BY WAY OF MY SIGNATURE BELOW, I FULLY UNDERSTAND THAT ALL OF THE FOLLOWING CONDITIONS MUST APPLY.

✓ I MUST BE ON LEAVE WITHOUT PAY FROM CANADA POST **(STDP DOES NOT QUALIFY)**

✓ I AM EXPERIENCING FINANCIAL HARDSHIP

✓ I WILL INFORM THE LONDON LOCAL OF A PAY STATUS CHANGE WHILE THE WAIVER IS IN

 EFFECT

✓ MY REQUEST IS SUBJECT TO APPROVAL OF THE LOCAL MEMBERSHIP

✓ SHOULD MY REQUEST BE DENIED, THAT SECTION 1.07 OF THE CUPW NATIONAL

 CONSTITUTION WILL APPLY TO MY MEMBERSHIP STATUS

SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

THIS REQUEST MUST BE RETURNED TO THE ATTENTION OF

LONDON LOCAL SECRETARY-TREASURER