

# TRAINING REQUEST FORM

## YOUR CONTACT DETAILS

Name

Location  Mobile Phone

E-mail Address

I am interested in participating in Delegate Training and wish to undertake

Level 1 Delegate Training

Level 2 Delegate Training "Campaigning"

Do you currently have a position on your Sub-Branch?

YES

NO

If yes, what position?

If no, please tick the most accurate statement below:

I am a workplace delegate but do not have Sub Branch

YES

NO

I am not a delegate but am interested in becoming one

YES

NO

I am not interested in becoming a delegate but want to assist my delegates

I am interested in knowing more about the union

## PLEASE FAX

to HSU head office on – **1300 329 478** (Attention Graham Conroy)

or Email to [TandD@hsu.asn.au](mailto:TandD@hsu.asn.au)

Thank you for your interest.  
Someone from our union will contact  
you shortly.