

Harvard Trade Union Program

(Please print or type)

NAME: (in full) _____ Nickname: _____
First Last

DATE OF BIRTH: _____ GENDER _____ SOCIAL SECURITY NO: _____
Last four digits

HOME ADDRESS: _____
(street) (city or town)

(state) (zip code) (country) (home phone) (cell phone)

UNION AFFILIATION: _____

PRESENT UNION POSITION: _____ HOW LONG? _____
As listed on business card

OFFICE ADDRESS: _____
(street)

(city or town) (state) (zip code) (country)

(phone) (fax) (e-mail)

WHO WILL BE PAYING YOUR TUITION & EXPENSES? (Sponsor): _____

SPONSOR'S CONTACT: _____ TITLE _____ PHONE _____

SPONSOR'S ADDRESS: _____
(street)

(city or town) (state) (zip code) email

PAST UNION AFFILIATION(S)/POSITION(S) (Use separate sheet if necessary):

(union) (from-to) (position/s)

(union) (from-to) (position/s)

(union) (from-to) (position/s)

EDUCATIONAL EXPERIENCE (Please list all schools attended and use a separate sheet if necessary):

(school) (location) (dates) (degree)

(school) (location) (dates) (degree)

(school) (location) (dates) (degree)

PLEASE INDICATE ANY OTHER EXPERIENCE THAT YOU THINK MAY BE RELEVANT:

PLEASE INDICATE COMMUNITY ACTIVITIES AND/OR OTHER ORGANIZATION AFFILIATIONS:

(Use separate sheet if necessary)

OTHER PERSONAL INTERESTS:

PLEASE ANSWER THE FOLLOWING QUESTION ON A SEPARATE SHEET OF PAPER. PUT YOUR NAME IN THE UPPER RIGHT HAND CORNER OF EACH PAGE AND RETURN IT WITH YOUR COMPLETED APPLICATION.

1. Please describe how the Harvard University Trade Union Program can be most helpful to your development as a union leader. Your goals for your union or the labor movement are of particular interest.

WHAT TOPICS WOULD YOU LIKE TO SEE COVERED IN THE PROGRAM? (Please list in order of importance)

PLEASE INDICATE HOW YOU HEARD ABOUT THE HARVARD TRADE UNION PROGRAM:

DO YOU SMOKE? YES NO (circle one)

WOULD YOU PREFER A *NON-SMOKING* APARTMENT MATE? NO YES NO (circle one)
PREFERENCE

SOME SINGLE ACCOMMODATIONS MAY BE AVAILABLE ON A FIRST COME FIRST SERVE BASIS AND AT AN EXTRA COST TO YOU OR TO YOUR ORGANIZATIONS OR UNIONS. Please contact us for more information and for cost associated to single accommodations.

Signature

date

Please return this completed application form and your answer to Question 1 to:

Labor and Worklife Program at Harvard Law School
Harvard Trade Union Program
8 Mt. Auburn Street, 1st floor
Cambridge, MA 02138
Phone: 617-495-9265
Fax: 617-496-7359