



# *Alaskans Working For Alaska!*

\_\_\_\_\_ Chapter

## **Steward Nomination Form**

This form must be completed by the member and the Chief Steward and faxed to (907) 277-5206.

Name: \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Department: \_\_\_\_\_ Division: \_\_\_\_\_

Work Site/Address: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Work Email Address: \_\_\_\_\_

Can you receive email at work? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Please explain why you want to be a steward.

I am a member in good standing. I pledge to help my fellow union members when they encounter worksite problems. I will attend the required steward meetings, and I will attend the mandatory Basic Steward Training within six months of becoming a certified steward. I understand that failure to attend this mandatory steward training may result in my being decertified as a Union Steward.

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Date

As Chief Steward, I certify that the above member has been elected/appointed as a Union Steward.

\_\_\_\_\_  
Chief Steward (Print and Sign)

\_\_\_\_\_  
Date

The ASEA/AFSCME Local 52 Union Headquarters will certify you as a steward with the State and AFSCME International upon confirmation by your chapter of your election or appointment and confirmation that you meet the eligibility requirements as a steward. You must recertify or become re-elected every two years.