


UBCJA LOCAL 2103

# REQUEST FOR R.O.E.'s

attention SERVICE CANADA

 506-548-7149

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SOCIAL INSURANCE NUMBER: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

UBC LOCAL: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

I, ( full name ) \_\_\_\_\_, give my full consent and authorization to the United Brotherhood of Carpenters and Allied Workers, Local Union 2103, in Calgary, Alberta, to obtain copies of my Records of Employment from \_\_\_\_\_ ( if ex-member year of last initiation ) to and including \_\_\_\_\_ ( current year ).

I, ( full name ) \_\_\_\_\_, understand that my Records of Employment will be used to prove my Hours of Experience as a Carpenter and/or a Scaffolder so that the UBCJA Local 2103 may determine my trade status within the Local Union. I understand that I will not be dispatched to a job for ninety (90) days unless the Local Union cannot supply the required manpower as outlined by Local Bylaws and Trade Rules Section 2:08.

I, ( full name ) \_\_\_\_\_, give my full consent and authorization to Service Canada to release and send copies of my Records of Employment for the above mentioned years to:

ARCCAW Local 2103  
2626 - 23<sup>rd</sup> Street NE  
Calgary, AB T2E 8L1

FAX: 403-283-6425  
PHONE: 403-283-0747

\_\_\_\_\_  
( signature )

\_\_\_\_\_  
( date )

PLEASE RETURN THE COMPLETED FORM TO THE CARPENTERS LOCAL 2103 UNION HALL