VSEA Steward Application

Compations	isiam.
	iciary State Deputy Sheriffs Management Unit Supervisory
	n-Management Unit Supervisory te's Attorneys' Office Vermont State Colleges
│ Housing Authority	te's Attorneys Office
	Desiries Titles
	Position Title:
Department:	Division:
Town/City:	
Home Mailing Address:	Work Mailing Address:
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Home Phone:	
Home Email:	Work Email:
How many years have you been:	
(a) a state employee:	(b) a VSEA member:
List any VSEA activities/ offices in	n which you have participated:
Do you attend your local VSEA cha	apter meetings? Please explain:
How many employees (approx.) a	re: (a) in your worksite:
	(b) in your building:
Which departments are in your bu	
-	

Vermont State Employees' Association - 155 State Street, Montpelier VT - 802-223-5247 - vsea@vsea.org - VSEA.org



9. What are your work hours? If you are on shift-work or a flextime schedu explain your hours/days:			
10. Is your workload flexible e VSEA steward position? Ple	nough to permit you to assume the responsibilities of a ease explain:	 I	
11. Please explain why you wish	to serve as a VSEA Steward (use additional sheets if needed		
12. List two (3) co-worker refe	-		
	Phone:		
	Phone:Phone:		
•	aining as scheduled by the VSEA Headquarters and must infor ange in address or work location/department.	'n	
•	transferable to other worksites/departments/geographic areaval of your bargaining unit executive committee.	as	
Please return applications to VSEA to VSEA, 155 State Street, Montpo	A HQ via email: VSEA@VSEA.ORG, or mail/ drop off application elier, VT 05602	ns	
	ing this application or the role of a VSEA Steward, s at 802-223-5247, vsea@vsea.org, or your Unit		
Visit http://www.vsea.org/ste for more information about VSEA	ward or scan this QR code with your smartphone Union Stewards.		
 Signature			

