PUBLICATIONS - ORDER FORM

Name:			Date:		
Position:	☐ Local Executive	□ NAC Chair	□ Local OH8	S Representative	
Email Address:			Phone Number:		
Request for Local #: Facility/Ag			gency:		
Facility/Ag	ency Address:		City:	PC:	
EXECUTI	VE PUBLICATIONS			QUANTITY	
Local Exe	cutive Tool Kit (max. 5)				
Labour Relations: Member Issues Form					
Labour Relations: Fact Sheet					
SUN District Council (SDC) Executive Guidebook (max. 5)					
Your Union & You (New Member) Booklet					
Facts For New Graduates (brochure)					
NURSING ADVISORY (NAC) PUBLICATIONS					
 Work Situation Report (WSR) Form (Official document) Base/Regional Hospitals: Request is for Units All Other Facilities/Agencies: Request is for the following office(s)/locations(s): 					
SAMPLE Work Situation Report (WSR) Form (For practice or educational purposes)					
How To Complete A Work Situation Report (WSR) Form (brochure)					
NAC: Steps in the Problem Solving Process (11" x 17" poster)					
Nursing Advisory Committee (NAC) Local Chair Tool Kit					

Work Situation Report (WSR) Investigation Sheet

OCCUPATIONAL HEALTH & SAFETY (OH&S) PUBLICATIONS

QUANTITY

Local OH&S Representative (max. 10)

- Base/Regional Hospitals: Request is for _____ Units
- All Other Facilities/Agencies: Request is for the following office(s)/ locations(s):

Occupational Health & Safety (OH&S) Fact Sheet

Please return completed form to the Regina SUN Office - Attn: Janelle Ruhr @ 2330 2nd Avenue, Regina, SK S4R 1A6 janelle.ruhr@sun-nurses.sk.ca fax: (306) 522-4612

SUN OFFICE USE ONLY		
Date Received:	Date Shipped:	Processed by: