Nomination Form

Yukon Federation of Labour

Position Nominated For	Affiliate Local / Component or District / Union
Name of Nominee: Signature of Nominee:	
Name of Nominator: Signature of Nominator:	
Name of Ranking Officer of Affiliate Union: Signature of Ranking Officer: Date:	

☐ Yes, all signatures are Members in Good Standing of Affiliate with the YFL and CLC.

Please return completed form to yfl@yukonfed.com

YUKON FEDERATION OF LABOUR

Yukon Federation of Labour 315 2237 2nd Ave. Whitehorse, Yukon Y1A 0K7 (867)456-8250

New Officer Form

Yukon Federation of Labour

Position / Title	Affiliate Local / Componer	nt or District / Union
Full Name:		
Mail Address:		
Email:		
Phone:		
DATH TO BE SIGNED BY THE O	FFICER	
"I do hereby, sincerely pledg	e my word and honour to pe	erform my duties as an Officer
of the Yukon Federation o	f Labour. I will attend, wher	n able to do so, all meetings
of the Executive Council or Executive	e Board of which I am a mei	mber. At the end of my term of office,
I shall turn over to the Yukon F	ederation of Lahour, or my	successor all properties or funds
in my pos	session that belong to the F	ederation."
	Signature	Date

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Resignation Form

Yukon Federation of Labour

Date:	
Dear Yukon Federation of Labour Executive Cour	ncil,
Due to	
circumstance, I will be unable to fulfill my duties	as an Executive Council member.
Please accept this letter as my resignation.	
Thank-you,	
(signature)	(print name)
Resignation acknowledged and accepted by:	
(YFL President)	

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