**TFW RAIL LIMITED**

**LOCAL HEALTH AND SAFETY STAFF REPRESENTATIVE**

**NOMINATION FORM**

****

Please complete using block capitals

| **Constituency** |  |
| --- | --- |
| **Full Name** |  |
| **TSSA Membership Number \*** |  |
| **Job Title** |  |
| **Grade/Band** |  |
| **Full Work Address (including postcode)** |  |
|  |
|  |
|  |
| **Work email address**  |  |
| **Home email address** |  |
| **Mobile phone number** |  |
| **Work phone number** |  |

**\* If not known, please enter National Insurance number**

**I accept nomination as a TSSA staff representative. I agree to abide by the TSSA Rules, and by the policies of TSSA as determined by TSSA Conference and the TSSA Executive Committee. I also give my consent, for the purposes of the Data Protection Act, to the disclosure of my membership of TSSA to my employer and to any such third parties as TSSA shall consider appropriate, in respect of this election and in connection with carrying out the role and duties of a TSSA staff representative.**

**Signature………………………………………….……………………. Date……………………………………………………….**

**The following TSSA members are employed by *(employer)* within the relevant constituency, and support the nomination of the above person:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Grade/Band** | **Work Location** | **Signature** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

For office use only: Membership System updated 🞎 Reps tracking log updated 🞎 Employer advised in writing 🞎

**LOCAL HEALTH AND SAFETY STAFF REPRESENTATIVE**

**NOMINATION FORM**

**NOTES FOR GUIDANCE:**

In order to stand for election as a TSSA local health and safety staff representative, prospective candidates **must**:

* be a member of TSSA;
* be employed by TFW Rail Limited;
* be currently employed in a post covered by the constituency for which a candidate seeks election;
* be in a grade/band for which TSSA has collective bargaining rights;
* have a minimum of 6 months service with TFW Rail Limited;

Prospective candidates **must** also be supported by 6 nominators, each one of whom **must**:

* be a member of TSSA;
* be employed by TFW Rail Limited;
* be currently employed in a post covered by the constituency for which a candidate seeks election;
* be in a grade/band for which TSSA has collective bargaining rights;
* have a minimum of 6 months service with TFW Rail Limited;

If there are not **6** eligible nominators for a particular constituency, prospective candidates should contact the TSSA Helpdesk for guidance.

Prospective candidates **MUST** comply with the Notes for Guidance and complete the nomination form in full. Failure to do so may result in the nomination being declared invalid.

All information on the nomination form will be treated by TSSA as strictly confidential.

The completed nomination paper should be sent to TSSAbyemail to: southgateg@tssa.org.uk

Any member seeking further information regarding the election and nomination process should contact the TSSA Helpdesk – freephone 0800 328 2673, or email enquiries@tssa.org.uk