



Bargaining Survey



Our Collective Agreement Expires December 31, 2017
We need your input! Deadline to Submit September 30, 2017

Local 417 President: Barry Brookes CUPE National Representative: Lisa Mason

Dear CUPE Member:

We will be entering negotiations in the near future. As always, CUPE is seeking a freely negotiated settlement that addresses the priorities of our members. **WE NEED YOUR INPUT AND SUPPORT.** The results of this survey will form the basis of our proposals and will be subject to final approval, amendments and additions of the membership at a Special Meeting to be held before we meet with the employer.

1. PERSONAL BACKGROUND

a. Position	<input type="checkbox"/> Outside Worker
	<input type="checkbox"/> Inside Worker
Job Code: _____	

b. Employment Status: Full-Time Part-Time Casual Temporary Seasonal

2a. COLLECTIVE AGREEMENT ARTICLES – What changes or additions to the language/articles in the Collective Agreements would you like to see? Please list the applicable article and what change(s) you would like to see.

1. Article # _____

Change/Addition: _____

2. Article # _____

Change/Addition: _____

3. Article# _____

Change/Addition _____

2b. PRIORITY ISSUES - In your view, please indicate how important each of the following issues are for the **next round of bargaining**:

		High Priority	Low Priority
1.	Wages	<input type="checkbox"/>	<input type="checkbox"/>
2.	Health Benefits	<input type="checkbox"/>	<input type="checkbox"/>
3.	Sick Benefits	<input type="checkbox"/>	<input type="checkbox"/>
4.	Violence in the workplace	<input type="checkbox"/>	<input type="checkbox"/>
5.	Staffing Levels/Workload	<input type="checkbox"/>	<input type="checkbox"/>
6.	Vacation Time	<input type="checkbox"/>	<input type="checkbox"/>
7.	Personal Leave	<input type="checkbox"/>	<input type="checkbox"/>
8.	Workplace Learning	<input type="checkbox"/>	<input type="checkbox"/>
9.	Job Security/Contracting Out	<input type="checkbox"/>	<input type="checkbox"/>
10.	Pension	<input type="checkbox"/>	<input type="checkbox"/>
11.	Rest Periods	<input type="checkbox"/>	<input type="checkbox"/>
12.	Shift Premiums	<input type="checkbox"/>	<input type="checkbox"/>
13.	Family Time / Appointments	<input type="checkbox"/>	<input type="checkbox"/>
14.	Health & Safety	<input type="checkbox"/>	<input type="checkbox"/>
15.	Other Issue: _____	<input type="checkbox"/>	<input type="checkbox"/>

2c.

Please list the three issues you consider most important from those above (1-12):	Priority 1	#
	Priority 2	#
	Priority 3	#

3. NEGOTIATIONS

- a. **Salary:** CUPE will be seeking a salary increase during the upcoming round of negotiations. Please indicate the term of agreement and wage increases that you think the union should be seeking:

Term of agreement: 1 year 2 year 3 year

% Wage Increase: In year 1 _____
 In year 2 _____
 In year 3 _____

- b. Would you like to see improvements in health benefits? Yes No Don't Know

If yes, please identify priority areas for benefit improvements: _____

- c. Would you like to see increases in Health Spending Accounts/Health & Wellness Accounts?

Yes No Don't Know

If yes, please indicate amount of increase: _____

4. HEALTH & SAFETY – Do you have any of the following concerns related to health and safety?

		Yes	No
a.	Increase in health and safety concerns in the workplace	<input type="checkbox"/>	<input type="checkbox"/>
b.	Concerns about threats or incidents of violence in the workplace	<input type="checkbox"/>	<input type="checkbox"/>
c.	Lack of training related to health and safety issues	<input type="checkbox"/>	<input type="checkbox"/>
d.	Workplace Morale	<input type="checkbox"/>	<input type="checkbox"/>

5. Please add any additional comments you would like CUPE to consider in preparing for this round of bargaining: _____

6. What activities would you consider becoming involved in to support your bargaining committee? (work place communication, wearing CUPE pins/buttons, information pickets, other activities)

7. Please provide Name and Contact information if you are willing to help out. (Optional)

- a. Name: _____
- b. Phone: _____
- c. Email: _____

Thank you!

Please return your survey to:

Cupe417@telusplanet.net

OR

#250 5002 55 Street

Red Deer, AB. T4N 7A4

OR

Any Executive Member or Shop Steward

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***Don't forget – you will need a CUPE membership card in order to vote to ratify the agreement. Contact your Shop Steward or any Executive member now to get one for only \$2.00!**