MICHIGAN STATE EMPLOYEES ASSOCIATION JOB STEWARD CERTIFICATION FORM

Members who are interested in becoming a job steward or renewing certification, please submit your request to MSEA Central Office. The Committee will review the application and if qualifications are met, the Committee will forward the request to your Department Caucus Spokesperson for their approval. Once approved, the Committee will certify you as an active job steward for the life of the current MSEA contract. Your status will then be certified to the Office of the State Employer.

	New Application	Renewal	
Name		Employee ID	
Address	City	zy Zip	
Home Phone	Work Phone	Cell Phone	
MSEA Region	Shift Departm	nent Work Site	
E-mail Address (ple	ease do not use State of N	MI)	
MSEA Steward Tra	iining Attended: Basic 🗌	Advanced	
Please list dates ar	nd type:		
I hereby certify that Constitution and Bo	· · ·	es set forth for all stewards in the MSEA	
Applicant Signature	9	Date	
Approved by Cauc	us Chairperson	Date	
Certified by Central	Office Staff Name	Date	
Certified by Stewa	ard & Training Committee	Date e Chairperson	