

ENROLLMENT PROCEDURES

Leadership I

- Consists of classes in the fundamentals of trade unionism, and the basic laws and operations of the IAM. This includes: Parliamentary Procedure & Organizational Administration, Labor History, Government & Politics, Role of the Steward, and Human Rights.
- If the program(s) the lodge has requested is/are full, those members will be placed on the priority waiting list for 2012.
- No more than **two (2) enrollments** will be accepted from a lodge per year, including those assigned to a class from the priority waiting list from the previous year.
- Lodges are urged to fax **or** mail the Enrollment Form to the Winpisinger Center as soon as possible. **DO NOT SUBMIT DUPLICATE FORMS.** Enrollments are based on a first come, first served basis, in keeping with the October 21, 2005 Policy Letter. Limited seating is available per program.
- When an enrollment is accepted, a notification will be sent to the lodge submitter notifying them of the enrollment.
- Approximately 6 to 8 weeks before the starting date of the program a packet will be sent to the participant with a dated Program Reservation/Travel Information Request form, and further instructions.
- Cancellation of confirmed enrollments and "no-shows" will be counted as a "turn" and will affect the eligibility status of your lodge to have participants in future schools. **UNUSED TRANSPORTATION COSTS WILL RESULT IN PAYMENT BY THE LODGE.**

Cost

- Lodging is provided at the William W. Winpisinger Education and Technology Center's dormitory at no charge to the member for room, meals, tuition, study materials, and refreshments. Gratuities and fundraising are the member's obligation.
- Any room charges incurred or other expenses outside the Winpisinger Center are the responsibility of the participant or the local or district lodge. Transportation to the Winpisinger Center will be provided as outlined in the October 21, 2005 Policy Letter. Lost time and normal out-of-pocket expenses may be paid by the Lodge (depending on Lodge by-laws). Out-of-pocket expenses are minimal at the Winpisinger Center. Most members find that about \$100 in spending money is enough for: cab fare, souvenirs, gratuities and MNPL donations.
- Shipping class materials home are at your own expense.

Additional Information

- All correspondence or requests for information in regards to programs described in this announcement should be directed to: William W. Winpisinger Education and Technology Center, 24494 Placid Harbor Way, Hollywood, Maryland 20636. Phone inquiries may be directed to (301) 373-8820. Office hours are Monday - Friday, 8:00 am - 4:00 pm EST.
- **Please retain original blank copies of Enrollment Forms for future reference or changes.**

*****REMEMBER - INCOMPLETE FORMS CANNOT BE PROCESSED*****

For Office Use Only

Date Received	GVP Code	LL Seats	Assign Date	Subm Roster	Part Record	Update Record	New Record	Acct. Statement	Enroll	Enroll Letter

2011 OFFICIAL ENROLLMENT FORM LEADERSHIP I

Review the "Enrollment Procedures" on page 4. **Fax to:** (301) 373-2860; **or Mail to:** William W. Winpisinger Education and Technology Center, 24494 Placid Harbor Way, Hollywood, MD 20636
Please do not submit duplicate enrollment forms – fax or mail.

Complete all information on both pages. Incomplete forms cannot be processed.

DATES ARE NOT GUARANTEED

Participant #1 of 2: (Mandatory – The following information must be filled in)

Date of School Requested: _____ **English** **Spanish**

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

Full Name (as printed on member's ID): _____ Date of Birth _____

Union Position: _____ Territory _____ Gender: Brother Sister

Local # _____ District # _____ **Submitted by:** Local District (please check one)

Home Address: _____

City: _____ State/Province: _____ Zip Code/Postal Code: _____

Evening Phone: () _____ Day/Cell Phone: () _____

Fax Number: () _____ E-Mail: _____

Last 4 digits of SSN/SIN: _____ IAM Book No: _____

Employer _____

Participant #2 of 2: (Mandatory – The following information must be filled in)

Date of School Requested: _____ **English** **Spanish**

1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

Full Name (as printed on member's ID): _____ Date of Birth _____

Union Position: _____ Territory _____ Gender: Brother Sister

Local # _____ District # _____ **Submitted by:** Local District (please check one)

Home Address: _____

City: _____ State/Province: _____ Zip Code/Postal Code: _____

Evening Phone: () _____ Day/Cell Phone: () _____

Fax Number: () _____ E-Mail: _____

Last 4 digits of SSN/SIN: _____ IAM Book No: _____

Employer _____

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Please type or print the information below

Members cannot submit for themselves. Submitter information must be filled out by the Local Lodge President, Business Rep or General Chairperson.

*Submitted by: _____

Title: _____

Lodge No: _____ or District No: _____

Address 1: _____

Address 2: _____

City: _____ State/Province: _____ Zip Code/Postal Code: _____

Day/Cell Phone: () _____ Extension or Department: _____

Fax No. () _____ E-Mail address: _____

Lodge President: _____ Phone: _____

***ENROLLMENTS CANNOT BE PROCESSED WITHOUT SUBMITTER INFORMATION.**