



CONNECTICUT CORRECTION EMPLOYEES AFSCME LOCAL 1565

78 Eastern Boulevard
Glastonbury, Ct 06033
fax: 860-430-6001

CONTACT INFORMATION

NAME _____ JOB TITLE _____ HIRE DATE _____

FACILITY _____ SLOT _____ SHIFT _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

CELL PHONE () _____ HOME PHONE () _____

WORK PHONE () _____

PERSONAL EMAIL _____ WORK EMAIL _____

OFFICE USE ONLY

DATE APPLICATION RECEIVED BY STEWARD COMMITTEE _____

DATE APPROVED OR DENIED BY STEWARD COMMITTEE _____

DATE APPROVED OR DENIED BY EXECUTIVE BOARD _____

DATE APPLICATION SWORN IN (STEWARDS CREDENTIALS) _____

LOCAL CHIEF STEWARD

PRESIDENT/VICE PRESIDENT

ALL STEWARDS ARE REQUIRED TO ATTEND LOCAL 1565 STEWARDS TRAINING. NEW STEWARDS WILL BE PLACED ON A ONE YEAR PROBATION PERIOD AND MUST REMAIN IN GOOD STANDING, ATTEND ALL MANDATORY MEETINGS AND MAINTAIN A LEVEL OF CONDUCT BECOMING OF A STEWARD.

In the public service . . .



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PROSPECTIVE STEWARDS QUESTIONNAIRE

TO APPLY FOR STEWARDSHIP YOU HAVE TO:

- HAVE BEEN AN EMPLOYEE IN THE DEPARTMENT FOR 3 YEARS
- BE A MEMBER IN GOOD STANDING OF LOCAL 1565
- ALL PARTS OF THIS APPLICATION MUST BE FILLED OUT AND LEGIBLE.

1. HOW LONG HAVE YOU BEEN AT YOUR CURRENT FACILITY?
2. WHAT OTHER FACILITIES HAVE YOU WORKED AT? HOW LONG DID YOU WORK AT EACH FACILITY?

3. DO YOU HAVE ANY EXPERIENCE OR SKILL SET THAT YOU THINK WILL MAKE YOU AN ASSET AS A STEWARD?

4. WHAT IS THE REASON/REASONS THAT YOU WISH TO BECOME A UNION STEWARD?

5. IDENTIFY A CURRENT PROBLEM AT YOUR FACILITY AND HOW YOU PLAN ON ADDRESSING THIS ISSUE AS A UNION STEWARD:

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6. HAVE YOU EVER BEEN A STEWARD OR BEEN ACTIVE IN A PREVIOUS UNION? IF SO, WHAT POSITION DID YOU HOLD AND IN WHAT CAPACITY WERE YOU INVOLVED?

7. IN YOUR TIME AS A STATE EMPLOYEE, HAVE YOU HAD ANY PROBLEMS WITH SUPERVISORS OR ADMINISTRATION? IF SO HOW DID YOU HANDLE THE PROBLEM?

8. ARE YOU WILLING TO HANDLE ISSUES EITHER ON THE PHONE OR AT THE FACILITY IN YOUR OFF TIME? IF NOT WHY?

9. WHEN A CLEAR VIOLATION OF THE CONTRACT HAS BEEN FOUND, ARE YOU WILLING TO WRITE A GREIVANCE EVEN IF CONFLICT MIGHT ARISE WITH MANAGEMENT AS A RESULT? IF NOT STATE YOUR REASON?

10. DO YOU HAVE ANY ISSUE TALKING WITH SUPERVISORS AND OR UPPER MANAGEMENT TO RESOLVE FACILITY PROBLEMS?

UPON COMPLETION OF THIS FORM, PLEASE RETURN IT TO:

Local 1565

78 Eastern Boulevard

Glastonbury, CT 06359

Fax: 860-430-6001

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LOCAL 1565 CHIEF STEWARD INTERVIEW NOTES:

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