

INTERNAL HEADS

EQUITY REPORTING FOR M

DEPARTMENT/UNIT:	_____	DATE OF	_____
FACULTY/SCHOOL:	_____	APPOINTMENT:	_____

Please list all members of the selection committee in accordance with Articles 41.2 of the Collective Agreement. All members must have participated in an Employment Equity workshop for Appointments and the Employment Equity Representative must have participated in the Employment Equity Representative workshop. Please indicate training for each committee member with either Yes or No.

A. SELECTION COMMITTEE

WHO	NAME	EQUITY TRAINING
Dean(or designate)		
Employment Equity Representative		
Student Representative		
Departmental Support Staff		
Member		

Member