



# Annual General Meeting 2024: Branch Return

1. This form should be completed immediately after your Branch AGM;
2. Enter Branch Number below. When completing this form, please only use your NIPSA correspondence address;
3. Parts 1 and 2 must be completed by all Branches with Parts 3, 4, 5 being completed where appropriate;
4. Sign and date (digitally) the declaration on the last page and return the completed form to the Executive Officer, NIPSA Membership, by clicking the button below the declaration.

Personal Mobile: .....

Personal Email: .....

## Part 1 Election of Branch Officers

Branch No. ....

### Branch Secretary

Name:		Membership No.:
Address:		Postcode:
Work Tel:	Mobile:	Email:

### Branch Chairperson

Name:		Membership No.:
Address:		Postcode:
Work Tel:	Mobile:	Email:

### Branch Vice Chairperson

Name:		Membership No.:
Address:		Postcode:
Work Tel:	Mobile:	Email:

### Branch Organiser

Name:		Membership No.:
Address:		Postcode:
Work Tel:	Mobile:	Email:

### Branch Equality Officer

Name:		Membership No.:
Address:		Postcode:
Work Tel:	Mobile:	Email:

### Branch Women's Officer

Name:	Membership No.:	
Address:	Postcode:	
Work Tel:	Mobile:	Email:
Area Covered:		

## Part 2 Election of Health and Safety Representatives

Name:	Membership No.:	
Address:	Postcode:	
Work Tel:	Mobile:	Email:
Area Covered:		

Name:	Membership No.:	
Address:	Postcode:	
Work Tel:	Mobile:	Email:
Area Covered:		

## Part 3 Election of Branch Union Learning Representatives (ULR)

Name:	Membership No.:	
Address:	Postcode:	
Work Tel:	Mobile:	Email:
Area Covered:		

Name:	Membership No.:	
Address:	Postcode:	
Work Tel:	Mobile:	Email:
Area Covered:		

## Part 4 Election of Branch Committee

Name:		Membership No.:
Tel:	Email:	

Name:		Membership No.:
Tel:	Email:	

Name:		Membership No.:
Tel:	Email:	

Name:		Membership No.:
Tel:	Email:	

Name:		Membership No.:
Tel:	Email:	

Name:		Membership No.:
Tel:	Email:	

## Part 5 Affiliation to Trades Council(s)

Name of Trades Council:	
<i>Trades Council Official to whom fee should be sent:</i>	
Name:	Affiliation Fee £:
Address:	Postcode:

Name of Trades Council:	
<i>Trades Council Official to whom fee should be sent:</i>	
Name:	Affiliation Fee £:
Address:	Postcode:

# Declaration

This return is submitted by Branch \_\_\_\_\_ following its Annual General Meeting held on \_\_\_\_\_

I confirm that the persons named were elected to the positions shown and that affiliation to the Trades Council(s) named are approved in accordance with the rules of the Union.

The Branch will operate in accordance with the NIPSA Data Protection Policy available from the NIPSA website at: <https://nipsa.org.uk/#publications>

Signed: ..... Date: .....

Do you wish to receive a free NIPSA Diary?  **Yes**  **No**

## Data Protection Notice:

On 25th May 2020 the General Data Protection Regulation (“the GDPR”) came into force. The GDPR requires us to look at the way we use the personal information of our members and the reasons for which we use it. It also requires us to keep the members whose personal information we hold informed of our purposes, our obligations and their rights. Our Privacy Notice can be accessed on our website using the following link <https://nipsa.org.uk/#publications>

## For Official Use Only

Date Received:					
<b>Membership/Mailing Records Updated</b>					
Actioned by:					Date:
Loc Cd Checked	Record BS	HS Cards Issued	HS Letter Issued	Checked	Initials
<b>Membership Services</b>					
Actioned by:					Date:
<b>HQ Official and Personal Secretary: Records to be updated.</b>					
Actioned by (Personal Secretary):					Date:
Actioned by (HQ Official):					Date:
<b>Finance Records Updated (only if affiliated to Trade Council)</b>					
Actioned by:					Date:
<b>Recruitment Records Updated</b>			<b>Training Records Updated</b>		
Actioned by:		Date:	Actioned by:		Date:



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