

Last Name		First Name		Middle Initial
Residence Address				
Unit Number	Street Number	Street Name		PO Box
City/Town		Province		Postal Code
Telephone Number		Email Address		
Business Address				
Unit Number	Street Number	Street Name		PO Box
City/Town		Province		Postal Code
Telephone Number ext.	Fax Number	Email Address		

Please ensure that the following documents are submitted along with this application

- Résumé
- Two Writing Samples
- Three references (name, email, phone number)

I attest that I am a member of an underrepresented group and understand that priority will be given to people with disabilities, Indigenous, Black, and racialized individuals, as well as people from a diversity of ethnic and cultural origins, sexual orientations, gender identities and expressions.

Signature of Applicant	Date (yyyy/mm/dd)
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**Notice of Collection
Under Section 39(2), Freedom of Information and Protection of Privacy Act.**

Personal information in this form is being collected to assess suitability of applicants for the Arbitrator Development Program 2023-24. Any questions with regard to the collection or application of this information should be addressed to the Labour Relations Solutions - Arbitration Services, 400 University Avenue, 8th Floor, Toronto ON M7A 1T7.

The collection of socio-demographic information is necessary to better understand and advance diversification of the Arbitrator Development Program. Your individual socio-demographic information will be kept confidential.