



REGISTRATION OF NEW RMT HEALTH AND SAFETY REPRESENTATIVES

To: The Branch Secretary,

Please complete this form and return to your Regional Office for them to register your new safety representative.

Once your regional office has entered the details of the new safety rep on the membership database this will trigger a letter to the new rep with information on safety rep training courses, resources and support available to them. Shortly after this they will also be sent their safety rep ID card and badge.

Surname:

Forename:

Membership No:

Email address:

Mobile number:

Branch:

Grade:

Location:

Constituency:

Nominated at our branch meeting on

Day Month Year

Please provide the name of the rep the new rep is replacing, or if there is no current rep write NONE:

If the safety rep requires a letter from their Regional Organiser to their employer informing them that they are the appointed safety rep, please supply the following information:

Manager's Name:

Job Title:

Company:

Email address:

If the above section is left blank it will be assumed that the rep is already recognised as a safety rep and that a letter is not be required.

Please ensure that all information is supplied otherwise this form may not be processed.

Send from your branch email address as this confirms your branch has nominated the rep.