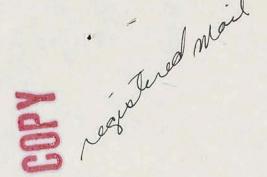
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To Name Nom Name Nom Name Nom Nom Nom Nom Nom Nom Nom Nom	modestion Service	THE GOVERNMENT OF THE PROVINCE OF BRUISH COLUMBIA
	desired. A produire en cas de réclamation. Dans Stands A Donne Stands A Dans Stands A	
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United States, its Territories and Possessions États-Unis, leurs territoires et leurs possessions	1980	tion for a Mediation Officer
Other Countries Les autres pays '(Maximum indemnity equivalent to 40 gold francs) '(Indemnité maximale équival- iente à 40 francs-or) 33-066-020 (7-76)	Postal Guide for Canadian Currency equivalent - Au maître de poste: Voir l'équivalent en monaie canadienne à l'article 2471 du Guide des Postes	h, Mediation Services Way (946 anada Way 299-7211
	The undersigned hereby rec	quests the Minister of Labour to appoint a Mediation Officer to cem to conclude a collective agreement.

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Address 2075 Wes (Number) If trade union has been If employer's name is di	ease make sure all name	(Stree and date?	Van et) April what nam are correct. Unan employ counsel sh	e(s) was (were) Use supplementary sheeters' organization	the certificati	on(s) issued?	
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	case make sure all name aployers are repre- number of the org ers involved, and t	es and addresses a esented by a ganization or he dates of ce	are correct. Unan employ	Jse supplementary shee	ets as required.)		
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(Note—If the enaddress, and telephone addresses of the employed give the present name of		ippearing in t		. If the name of	n addition to t	he names and	
2. If no certification exists	If no certification exists, is there a collective agreement in effect with the employer(s)/trade union named						
in this application?							
When does or did the la	st collective agree	ement					
(a) become effect	ive? April	1, 1979					
(b) terminate?	March	31, 1980					
3. Trade union involved in				7	1 T	J	
Name Association	of Universit	y and Col	Llege Em	ployees Loca	11 1		
Address 2162 West	ern Parkway	(Stree	et)	Vancouver,		(Zone)	
4. Approximate number o	f employees invol	lved 1400)				
: **							

(Enclose two (2) copies of the agreement, and please make sure the signing date, the date the agreement became effective, and the termination date are shown. Also please show the names, not necessarily signatures, of the persons who signed.)





DEPARTMENT OF LABOUR

LABOUR CODE OF BRITISH COLUMBIA ACT

Application for a Mediation Officer

Director, Mediation Services Branch, Mediation Services Way

4211 Kingsway,

Burnaby, B.C. V5H 1Z5

Burnaby, B.C. V5H 1Z5 The undersigned hereby requests the Minister of Labour to appoint a Mediation Officer to confer with the parties named herein to assist them to conclude a collective agreement. 1. Employer(s) engaged in the collective bargaining: Name The University of British Columbia Vancouver B.C. Address 2075 Wesbrook Mall (Street) (City) If trade union has been certified, upon what date? April 11, 1974 If employer's name is different from the above, under what name(s) was (were) the certification(s) issued? (Please make sure all names and addresses are correct. Use supplementary sheets as required.) (Note-If the employers are represented by an employers' organization or by counsel, the name, address, and telephone number of the organization or counsel should be given, in addition to the names and addresses of the employers involved, and the dates of certification. If the name of any employer has changed, give the present name of the employer as appearing in the certification.) 2. If no certification exists, is there a collective agreement in effect with the employer(s)/trade union named in this application? When does or did the last collective agreement April 1, 1979 (a) become effective?____ March 31, 1980 (b) terminate? 3. Trade union involved in the collective bargaining: Name Association of University and College Employees Local I Address 2162 Western Parkway Vancouver, (Zone) (Street) (City) 4. Approximate number of employees involved 1400

(Enclose two (2) copies of the agreement, and please make sure the signing date, the date the agreement became effective, and the termination date are shown. Also please show the names, not necessarily

signatures, of the persons who signed.)

5.	When was notice to commence bargaining given to the other party? Sandary 3, 1900 (Date)
	(Enclose two copies of the notice.)
5.	Have any meetings been held following the giving of notice under section 5? yes Date of
	last meeting March 4, 1980
7	Statement of matters remaining in dispute Please see enclosure A - Union's proposals
1.	enclosure B - University's proposal
	4.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2
5	(Use supplementary sheets as required) If strike and (ar) lackout notice has been given or received places supply the following information:
5.	If strike and (or) lockout notice has been given or received, please supply the following information:
	(a) Name of trade union or employer who served the notice N/A
	(b) Date and time notice was served N/A
).	Name, address, and telephone number of APPLICANT (trade union/employer or employers' organization):
	Name Association of University and College Employees Local I
	Address 2162 Western Parkway Vancouver, B.C. V6T IV6 (Number) (Street) (City) (Zone)
	Telephone No. 224–2308 (Use supplementary sheets as required)
).	Name and phone number of employer or his representative who is involved in collective bargaining.
	Name Ms. Jane Strudwick Phone No. 228-6791
١.	Name and phone number of trade union representative who is involved in collective bargaining.
	Name Wendy Bice Phone No. 224-2308
	I/We conscientiously believe and declare that all statements made herein are true to the best of our
fc	ormation and belief.
	Dated at Vancouver , B.C., this 4th day
f	March 19.80
	(Signature)
	(Title) Union Co-ordinator
	A II C E Local I