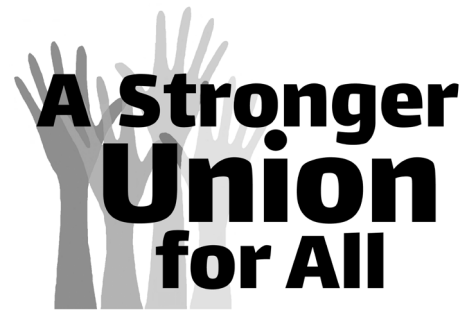


# Member Outreach Feedback Form



Your name \_\_\_\_\_ Employer \_\_\_\_\_

Member name \_\_\_\_\_ Date talked to \_\_\_\_\_

How can we contact this person? Please list best form of contact such as phone number (calls/text) or email :

\_\_\_\_\_

Worksite/Department/Shift/Job Title \_\_\_\_\_

How does this person feel about the union? (check one)

Very Pro-Union    Somewhat Pro-Union    Neutral    Somewhat Anti-Union    Very Anti-Union

Workplace leader in their department \_\_\_\_\_

What issues does this person care about? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Response to commitment card \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Interested in helping strengthen our union? (check all that apply)

Talk to my co-workers about the importance of sticking with our union

Join an organizing committee for our workplace

Become a Shop Steward to represent my coworkers

Other : \_\_\_\_\_



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