

### OK I AM IN, WHAT'S NEXT?

### Great! Let's get started.

Firstly, don't worry if there is already a Rep in your workplace, ward or unit, it is possible to have more than one - after all, two reference points are better than one. Simply follow the steps below or visit www.anmftas.org.au to learn more about the process.



Complete the first section of the nomination form included in this brochure, being careful not to miss any fields.



Next, you will need two fee-paying ANMF members to support your nomination by filling in their details before you sign and date the form.



Send the completed application form via email to membership@anmftas.org.au or post to Reply Paid 70389, Hobart, TAS 7000



Once your application has been received, we will notify you with a notice of Rep Nomination. You are required to display this notice publicly in your workplace for 7-10 days.



After the required time has passed, we will be in touch to confirm your nomination. In the event that there are any objections, a ballot will be held, and you will be notified of the results.



182 Macquarie Street, Hobart Tasmania, 7000 03 6223 6777 or 1800 001 241 (outside Hobart) enquiries@anmftas.org.au

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Do you want to speak-up for your colleagues and be involved in change?

Did you answer yes to any of these questions? You should consider becoming an ANMF Workplace Representative!

### WHAT IS A REP?

ANMF Workplace Representative's or 'Reps' as we affectionately refer to them, provide the vital link between the ANMF team in the office and members in the workplace. Reps act as a support system for members, while also promoting policies and campaigns, spreading the word about activities and events, participating in enterprise agreement negotiations, and most importantly, encouraging others in need of advice or representation to join the ANMF.

Put simply, as an ANMF Rep you are a resource for current and potential members to access when they need. Don't worry though, you are not alone in this, you will receive ongoing support and guidance along the way. You will develop a strong connection with the ANMF and be treated to some great benefits along the way.

### **HOW INVOLVED WILL I BE?**

As this is a voluntary role you can chose to be involved as much, or as little as you like. While we do encourage active participation, we also understand that your schedule is busy, so we leave this decision up to you. However involved you chose to be, the ANMF team will support you throughout your journey.

### WHAT DO I NEED TO KNOW?

You are not expected to know everything, that is our job. Your role is to simply act as a conduit for directing enquiries and updates to and from the ANMF team as needed. If you feel comfortable approaching new employees to become members, that would also be great! But, you are not locked into anything and you can choose to take a break or step down when you need.

### WHAT ARE THE BENEFITS?

We did mention there would be benefits didn't we?

Beyond having the opportunity to improve working conditions, while simultaneously advocating for safe quality care for patients, residents, and their families, you will have access to the below:



### **TRAINING & SUPPORT**

Ongoing training and support from the ANMF to empower you, and altimately your colleagues, o have the best workplace available.



### A LEADING VOICE

A voice in leading discussions around the future direction of healthcare and nursing in your workplace and more broadly, the state!



### **EDUCATION & CPD**

Access to free or discounted professiona development and CPD through training and workshop opportunities across the state



### **BENEFITS & MERCH**

As well as your own merchandise, you will be invited to our free two day Rep event. You'll have access to exclusive guest speakers and workshops

REPS HAVE ACCESS TO GREAT BENEFITS!

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## Complete the nomination form below before returning it to us to start the ball rolling.

# NOMINATION FORM

ETAIL!

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NOMINEE

# WE WISH TO NOMINATE THE BELOW MEMBER AS AN ANMF WORKPLACE REPRESENTATIVE: Nominee Name: Employer/Ward/Unit: Nominated by: Membership No: Signature: Seconded by: Membership No: Signature:

# I HEREBY ACCEPT THE NOMINATION TO BECOME AN ANMF WORKPLACE REPRESENTATIVE:

Date:	
Signature:	

NOMINEE DETAILS:
Name:
Address:
Phone:
Email:
Workplace:
Job position:

**Return via:** Email to membership@anmftas.org.au or Reply Paid 70389, Hobart, TAS 7000 (no stamp required)