

How to Submit Your Electronic Membership Application (EMA) Guide for OPSEU/SEFPO Members

Find out about this easy-to-use online alternative to the PDF version of the Membership Application form. It is online, and it is available through our web site <u>https://opseu.org</u> (EMA-Web) and through our Member Portal <u>https://members.opseu.org</u> (EMA-Portal).

Both EMA-Web and EMA-Portal will ultimately become the primary method for membership application. Our goal is to completely replace the use of PDF or paper forms. This will allow to greatly reduce the processing time from the moment you submit application to the moment you hold your membership card in your hands.

Tip: If you are a signed-up OPSEU/SEFPO member and have already completed a Membership Application form with your most current contact and job information, then you are not required to complete another form online. However, if there is a change in your job status or contact numbers, you are very welcome to use EMA to update our database with your most recent information. In addition, brought by the popular demand, we have included a new section in the form which provides you with the ability to subscribe for information from our equity caucuses and committees.

EMA through the Web

The Electronic Membership Application through the web (EMA-Web) is primarily for those **members who are new to OPSEU/SEFPO**, have never submitted a Membership Application and **have not been issued a member union number**. The application process is very easy to understand and simple to complete

Before you begin...

To ensure accuracy and avoid delays in the processing of your Membership Application, ensure that you have the following information available prior to accessing the EMA-Web link.



Your OPSEU/SEFPO Local:

The EMA form will guide you through the application process and narrow down the options. For most work environments, once you selected where you work, the Local will be auto populated. However, for some work locations there might be more than one selection of Locals. Please contact your steward, staff representative or nearest regional office to find out which one is your local. **You cannot complete your application without this information**.

Your Employee Number (or WIN Number):

Find out what is your Employee Number (also referred to as Win Number in the Ontario Public Service). Usually it is provided on pay stubs and hiring documentation.

Your OPSEU/SEFPO Bargaining Unit:

This will be automatically provided on the form through your selection of employer. If you can't find the correct entry, please consult with your steward, staff representative or nearest regional office.

Link to access EMA-Web

To make sure you have access to the most accurate information about EMA, it is best if you access the EMA-Web through OPSEU/SEFPO web site. Go to the Members page and click on the "Learn more" button underneath the "Need a Membership Card?" tile. You will see the link on the following page. Alternatively, you can use the link provided below, which is as good as the date of authoring this document:

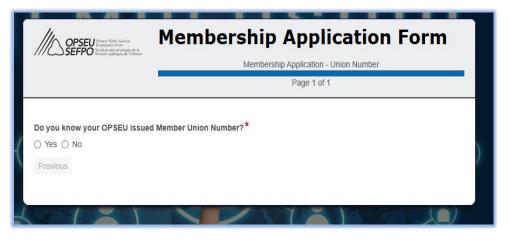
https://hub03.opseu.org/Forms/emaweb

Clicking on the link will initiate the application process, which normally takes less than a few minutes to complete.

EMA-Web process explained

The first screen you will see once you followed the EMA-Web link, is this:





If you select "Yes", then you know your Union Number and are invited to use OPSEU/SEFPO Member Portal to complete the application. If you are not registered for the portal, the process is also very simple and quick and can be completed in less than a minute. Please refer to the section <u>EMA through the Portal</u> further in this document for step-by-step instructions.

Select "No", if you are new to OPSEU/SEFPO and you don't yet have a member Union Number.

EMA-Web: page one

| OPSEU Dravia Rular Service SEFPO Professional da la Interest publica da la Interestina da la Interesti | Membership Application Form | |
|--|---------------------------------------|--|
| | Membership Application - Union Number | |
| | Page 1 of 5 | |
| Do you know your OPSEU issued Member Union Number?* O Yes No | | |
| Previous | Next | |

Only then the "Next" button will appear, and you can proceed to page two. Page two is a section of the application which includes your personal, demographics and contact information.



EMA-Web: page two

| | Membersh | ip Application Form |
|-------------------------------|--|--|
| /// SEFFO function public | | er Application - Personal Information |
| | | Page 2 of 5 |
| First Name* | Initials | Last Name [*] |
| | | |
| Gender | | Date of Birth * |
| ○ Female ○ Male ○ 0 | Other - please specify | yyyy-MM-dd |
| Unit / Apt # | Street Number, Street Name* | yyyy-mm-uu |
| | | |
| Province* | City* | Postal Code* |
| ON \checkmark | | |
| Cell Phone (?) | Н | e.g. A1A 1A1 ome Phone |
| e.g (444) 444-4444 or 444-444 | 4444 | e.g (444) 444-4444 or 444-4444 |
| Personal Email* | | Iternate Personal Email |
| | | |
| Previous | Please verify and update if needed all mandate | ary fields to proceed to Next section. |

Note fields marked by a red asterisk * which indicate a mandatory field and require information before you can move forward in the application process.

If any of the mandatory fields is missing, an error will display as in this example for the missing but required postal code:

| Postal Code* |
|--------------------|
| Value is required. |
| e.g. A1A 1A1 |

The "Next" button will not be displayed at the bottom right of the

page until you complete all mandatory fields marked by an asterisk. When the "Next" button is not displayed, carefully review the details entered in the form and note any error messages. Correct the error, **tab out** or click outside the cell, and proceed. The "Next" button will then be displayed. The "Next" button will only display when all required fields are complete and formatted as in the following example.



| | | Membe | r Application - Pers Page 2 of S | | |
|----------------------------|---------------------|---------------------------------|-------------------------------------|-----------------|--|
| First Name * | | Initials | Last Na | me* | |
| John Harold | | JH | Smith | | |
| Gender | | | | Date of Birth * | |
|) Female 🖲 Male (| Other - please spec | cify | | 1995-08-22 | |
| | | | | | |
| | | | | yyyy-MM-dd | |
| Unit / Apt # | Street Number, S | Street Name * | | | |
| 5 | 123 Green Lane | | | | |
| Province* | City* | | | Postal Code* | |
| ON V | Toronto | | | M5W 1T4 | |
| | | | | e.g. A1A 1A1 | |
| Cell Phone (?) | | Но | me Phone | | |
| (416) 222-2222 | | | | | |
| e.g (444) 444-4444 or 444- | 444-4444 | | g (444) 444-4444 or 444 | | |
| Personal Email* | | Alt | ernate Personal E | mail | |
| yourname@hotmail.co | om | | | | |
| | Please verify a | nd update if needed all mandato | ry fields to proceed to Ne | ext section. | |
| | | | | | |

Click "Next" to go to page three.



EMA-Web: page three

| OPSEU Draw Rate Server SEFPO Deder Rate Server | Membership Ap | plication Form |
|---|---|--|
| /// Construction publique de l'Ortains | Member Application | - Job Information |
| | Page 3 | of 5 |
| Where do you work?* | | |
| 2 | play a list of employers to choose from, navigate and the list will filter to your possible selections | through the list and choose your employer, |
| Work address: city | | |
| Job title* | Employee number (?) | Date of hire* (?) |
| | | yyyy-MM-dd |
| What is your OPSEU local?* | | |
| | this field may auto-populate.with your local or w | |
| Previous | | |

Page three of the EMA-Web Form allows you to provide your workplace and job details. Same rule for required fields is in effect. They are marked with an asterisk and must be completed before you can proceed to the next page.

Place your cursor on the 'Where do you work?" field and a list of employers will be displayed alphabetically. If you begin typing your workplace or employer name, the list will filter those employer names that contain the information you have entered.

| | - | |
|----------------|---|-------------------------------|
| | | |
| | | em |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 11 | * | |
| neactives N | | Date of hire [®] (7) |



You may continue typing your employer name as you see it displayed or move the mouse to select the entry and click. You may also use the scroll function on your mouse or on the right side of the list. Once you have selected your employer, move the mouse or tab out to the Work address section and provide additional details that will be helpful in identifying your workplace. Although these fields are not mandatory, they are helpful additions for those who work at various locations:

| 100 Yonge Street | |
|--------------------|--|
| Work address: city | |
| Toronto | |
| | |

Continue to the next section, Job title, Employee number and Date of hire:

| Job title* | Employee number (?) | Date of hire * (?) |
|------------|---------------------|--------------------|
| Clerk | 233651 | 2020-01-13 × |

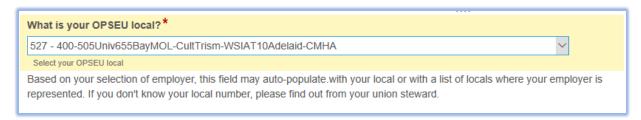
The Job Title field is a free text field to enter your job title. If you hover your mouse over the question mark (?) symbol beside the Employee number field, it provides additional information about the field. The additional information in the Date of hire field is that if you do not know your exact Date of Hire, you can indicate the first of the month you were hired.

The next section asks for your Local and Job status information. As explained earlier, in many cases the Local field will be automatically populated based on the selection in "Where do you work?" field. For example, if you work at the District of Parry Sound Social Services Administration Board, then your OPSEU/SEFPO Local is automatically populated as 324:



| District Of Parry Sound Social Services Admini | stration Board | |
|---|--|--|
| Select your employer | | |
| Clicking on the Employer field will display a list or type part of your employer's name and the list | | through the list and choose your employe |
| Work address: street number, street name | | |
| Work address: city | | |
| Job title* | Employee number (?) | Date of hire* (?) |
| | | |
| | | vyvv-MM-dd |
| What is your OPSEU local?* | | |
| 324 - DistrictofParrySoundSocialServicesAdmi | nBoard/CommunityLivingParrySound | ~ |
| Select your OPSEU local | | |
| Based on your selection of employer, this field r represented. If you don't know your local number | | |
| You work in the Broader Public Sector | (BPS) | |
| What is your job status?* | | |
| ○ Full-time ○ Reg. Part-time ○ Relief/Casua | al | |
| Diasco f | III in all mandatory fields to proceed to Next section | 00 |

If you, however, do not see the local field populated by the system, this means that your employer is linked to multiple locals and you must find out which one is yours. Scroll through the list to select. The list provides some descriptions, but it is always best to seek assistance from your unit steward or regional office staff prior to submitting the application. Refer to the section "Before you begin.." earlier in this document. This is to confirm that the information you provide reflects your local accurately.



The last section of page three is the Job status. Please make one selection and "Next" will display for you to proceed.



| You work in the Ontario Public Sector (OPS) | | | | |
|---|---|--------------------------|------|--|
| What is your job status?* | | | | |
| Full-time Flexible Part-time | Fixed Term Student | O Reg. Part-time | | |
| | Please fill in all mandatory fields to | proceed to Next section. | | |
| Previous | | | Next | |

EMA-Web: page four

Page four provides you with the option to subscribe for additional information from OPSEU/SEFPO equity committees and caucuses. Each option provides a drop-down arrow to expand the section. In each section there is a brief description of the committee as well as a checkbox allowing you to sign up for more information:

| Provincial Human Rights Committee | \odot |
|---|------------|
| | |
| Provincial Human Rights Committee | \bigcirc |
| PHRC | |
| The PHRC assists in establishing local and other human rights committees within Ontario and in OPSEU's regions. It develops and promotes programs that encourage all members to participate in Union activities, and increases awareness and understanding of workplace, community, national and international rights issues. | |
| I would like to receive more information about this committee | |

Leaving the box unchecked will remove you from the subscriber list if you have previously been a subscriber for information from that committee. After your selection, you may proceed with "Next".

EMA-Web: page five (final)

Page five and final section of the application is where you will find the Members Oath, Affinity box, Recruiter, Membership card request and the signature fields.



| Members O | ath* |
|---|--|
| matters pertain my fellow men | est and accept membership in the Ontario Public Service Employees Union. I authorize OPSEU to act as my exclusive bargaining agent in all ning to my employment relationship with my employer. I solemnly promise to uphold and obey the Constitution and By-laws of this Union, to assist nbers to improve their economic, political and social conditions, to uphold the principles of democracy and fair play, and to do no deliberate wrong or nember of this Union |
| I certify the local sector of the local sec | nat I have read and understood the above statements. |
| AffinityBox | |
| approved grou | does not sell or otherwise provide personal information to third parties, the union periodically provides information to members about union op affinity programs (ie. cell phones, home/auto insurance etc.). In accordance with the Privacy Act, if you do not wish to receive this type of ease mark box below: |
| 🗌 I do not w | vish to receive group affinity program information |

Please read the Members Oath and check the box indicating you have read and understood the statements.

| | Members Oath* |
|---|--|
| | I hereby request and accept membership in the Ontario Public Service Employees Union. I authorize OPSEU to act as my exclusive bargaining agent in all matters pertaining to my employment relationship with my employer. I solemnly promise to uphold and obey the Constitution and By-laws of this Union, to assist my fellow members to improve their economic, political and social conditions, to uphold the principles of democracy and fair play, and to do no deliberate wrong or harm to any member of this Union |
| l | ✓ I certify that I have read and understood the above statements. |

If you do **not wish** to receive the affinity program information, please check the box next to "I do not wish to receive group affinity program information", as in the screenshot example below.

| AffinityBox |
|---|
| While OPSEU does not sell or otherwise provide personal information to third parties, the union periodically provides information to members about union approved group affinity programs (ie. cell phones, home/auto insurance etc.). In accordance with the Privacy Act, if you do not wish to receive this type of information, please mark box below: |
| ☑ I do not wish to receive group affinity program information |

If anyone provided you with assistance in completing your electronic membership application, please indicate by selecting the applicable box.

| Recruiter |
|--|
| Who assisted you with this application ? |
| LEC Member |
| OPSEU Staff Representative |
| OPSEU Regional Office |
| Colleague/Steward |
| |

Membership card

If you wish to receive a membership card, select "Yes" from the drop down box.



| Yes Let us know if you need a new card or a new replacement membership card. | Do you require new membership card?* | | | | |
|---|--|--|--|--|--|
| Let us know if you need a new card or a new replacement membership card. | Yes 🗸 | | | | |
| | Let us know if you need a new card or a new replacement membership card. | | | | |

Signature

| By submitting this form <mark>, I hereby acknowledge that all the information given above is true to the best of my knowledge.</mark> | | | | |
|---|---------------------|--|--|--|
| Signature * | Date of Submission* | | | |
| Sign | 6/1/2020 | | | |
| Previous | Next | | | |

The signature section requires your signature and a date stamp of the submission (the date you completed the EMA). Click on the "Sign" button and proceed to providing a signature either in the form of typing it, or in the form of drawing it (if application is done on a touch screen device such as cell phone or tablet):

| Sign Document Type Draw | |
|-------------------------|-----------|
| Type your name here | Style |
| | |
| | |
| | |
| | Sign Canc |

Select "Type" to enter your name in the box provided and select style from the drop down option to make it look as you prefer. The stylized signature text will be displayed.



| Sign Document | × |
|---------------|---------|
| Type Draw | |
| John H Smith | Style 👻 |
| Iohn H Smit | ħ |
| Sign | Cancel |

You may also select "Draw":

| Sign Document | × | thi no |
|---------------|------|-----------|
| Туре | | \$ 3 |
| THE MALT | | ne t |
| | | l |
| | | l |
| Sign Car | ncel | |

Click on "Sign" to complete the signing process. The result may look like one of these screens:

| Signature * | | Signature * |
|--------------|---|-------------|
| John H Smith | × | THAS + Z |

EMA-Web: Review, Edit, Confirm and Submit

Before submitting your application, you now have an opportunity to review the details you have entered and make any corrections. Use the "Previous" button to go back through your Application details. This will ensure your member profile is accurate and assists us in identifying you each time you have a question or require information.

It is very important to review.

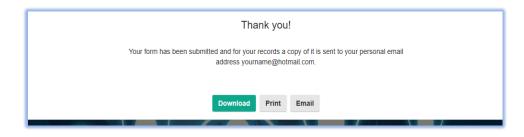


Your personal information will not be shared outside of OPSEU/SEFPO.

Submit Application

If you are confident with the information you have provided, select "Submit Application" button.

You will receive the following information on your screen



You have the options to save, print or email the completed application. The application will also be displayed in its entirety on the same screen. Here is a preview:

| | | | Than | k you! | | | | |
|----|--|--|---------------------------|--|---|--------------------|--|--|
| | | | | | | | | |
| | Yo | ur form has been submittee | | cords a copy of it is sent to me@hotmail.com. | o your personal email | | | |
| | | | , | | | | | |
| | | | | | | | | |
| | | | Download | Print Email | | | | |
| | | | | | | | | |
| | | | | - | | | | |
| | 1110 00000 | Mer | nhers | hin Annli | cation Form | | | |
| | ///SEFPO | na mise any ingen and an and an and an and any ingen and an and any ingen and an and an and an and an and an and an an and and | inders | mb Abbu | | | | |
| | | | | | | 10 | | |
| | | | | | | | | |
| | Marsharshin | Anniantian II | | h | | | | |
| | Membership | Application - U | nion Num | ber | | $\mathbf{\lambda}$ | | |
| | Do you know your (| OPSEU Issued Member U | nion Number? ¹ | k . | | | | |
| | O Yes No | | | | | | | |
| | | | | | | | | |
| | Member Application - Personal Information | | | | | | | |
| | First Name* | | Initiale | Last Nam | e* | | | |
| | John Harold | | JH | Smith | | SP Car | | |
| | Gender | | | | Date of Birth* | | | |
| P | O Female Male | O Other - please specify | | | 1995-08-22 | - | | |
| - | the first and the | | | | yyyy-MM-dd | | | |
| | Unit / Apt # | Street Number, Stre 123 Green Lane | et Name | | | | | |
| | Province* | City* | | | Postal Code* | | | |
| | ON | Toronto | | | M5W 1T4 | 1 pt | | |
| | | | | | e.g. A1A 1A1 | 1 | | |
| | Cell Phone (?) | | | Home Phone | | | | |
| | (416) 222-2222 e.g (444) 444-4444 or 44 | 4 444 4444 | | e.g (444) 444-4444 or 444-4 | 44-4444 | | | |
| | Personal Email* | | | Alternate Personal Em | all | | | |
| | yourname@hotmail.c | :om | | yourname@gmail.com | | | | |
| | | Please verify and o | pdate // needed all m | andstory fields to proceed to Next | section. | \sim | | |
| | | | | | | | | |
| | Member App | lication - Job In | formation | 1 | | | | |
| | Where do you work | 2* | | | | | | |
| | Ministry of Colleges a | | | | | | | |
| 1 | Select your employer | | | | | Park | | |
| S. | | over field will display a list of mployer's name and the lis | | | ough the list and choose your employer, | and a | | |
| | | | e win inter to you | possible selections | | | | |
| E | Work address: stree 100 Yonge Street | et number, street name | | | | | | |
| | Work address: city | | | | | | | |
| | Toronto | | | | | | | |
| 1 | Job title* | | Employee | number (?) | Date of hire* (?) | 1 | | |
| | | | 000004 | | | | | |



Tip: You will receive an email confirmation of your submission with the completed form attached, for your records, sent to your primary email address as provided on page two of the application.



Once the application is reviewed and vetted by OPSEU/SEFPO Membership Services, you will receive another confirmation email with temporary membership e-Card attached.

A plastic membership card will be sent via regular mail to your

home. It is important to provide a complete mailing address, including street number and name, the unit/apartment/suite number (if applicable), city, province and postal code.

Close the browser tab or screen to exit the process.

Congratulations on submitting your electronic membership application!

Your next step is to sign up for the OPSEU/SEFPO Member Portal.

OPSEU/SEFPO Member Portal is a self-service space and tool that provides secure access to your personal profile and union information relevant to you. Through the portal, members can:

- submit a membership application
- update their mailing address and email
- update information about dependents
- review their job information on record, including job status
- view their collective agreement
- sign up for direct deposit
- submit expense claims
- view important documents, for example family care and advance forms
- register for events
- view any local executive committee positions held
- view the names and contact information of their local executive committee
- send feedback



How to Sign Up for the Member Portal

Before you begin

You will need the following information in order to register successfully and gain access to the OPSEU/SEFPO Member Portal: you need to know your **OPSEU Union Number** and you need to know your **First Name** and **Last Name** exactly as they are entered in our membership database. Existing members can find this information on their OPSEU/SEFPO Membership Card. If you don't have a card yet, or if you need further help, you can call the nearest OPSEU/SEFPO regional office for assistance.

Once you have the necessary information at hand, open a Web browser and go to:

https://members.opseu.org

Click on the **[Sign Up Now]** button, then fill in the sign-up form as required:

Sign up information help

Union Number: Enter your OPSEU Union number.

First Name: Enter your first name as recorded in our membership database.

Last Name: Enter your last name as recorded in our membership database

Personal Email: Do NOT use employer email address.

Username: Create a valid username. (Note: you are free to create any logon name you wish. It does not have to be the same as your actual name. For example, you can use your Union number as your username.)

Password: Create a valid password.

Confirm Password: Re-enter the password

Keep this information safe and do not share it with anyone.

Once you have registered – you can sign in using the username and password you created.

| N | lember Portal | | |
|---|--|-----------|--|
| | First Time Here? | Sign In | |
| | | Username* | Forgot your username? Forgot your password? |
| | Sign Up Now Make sure you have your Union Membership Card ready as we will | Password* | |

Registration

Please fill in all of the fields below to register. As part of the registration process, we will send you a link to confirm your email address.

When providing your personal email, please do not use an employer email address.

| Who are you? | | | | | |
|----------------------|--|--|--|--|--|
| Union #* | | | | | |
| First Name* | | | | | |
| Last Name* | | | | | |
| Personal Email* | | | | | |
| Create a new account | | | | | |
| Username* | | | | | |
| Password* | | | | | |
| No Password Entered | | | | | |
| Confirm Password* | | | | | |
| | | | | | |
| Register | | | | | |