

**ADVANCEMENT REQUEST  
Tradeshow Specialist**

SPECIALIST      QJM

*\*Circle one*

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Union # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ New Address:   Yes \_\_\_\_\_   No \_\_\_\_\_

UBC ID: \_\_\_\_\_ Last 4 of SS #: \_\_\_\_\_

Current Employers' name: \_\_\_\_\_

Current status to be raised from: \_\_\_\_\_ period to \_\_\_\_\_ period.

Tool check completed by: \_\_\_\_\_ Date: \_\_\_\_\_

Are work logs turned in, equaling 500 + hours?   Yes \_\_\_\_\_   No \_\_\_\_\_

*(Advancements will not be processed unless work logs hours are attached to this form)*

List below which classes you have taken and dates:

\_\_\_\_\_

\_\_\_\_\_

*Note: Your request must be turned into the office by the first (1) Thursday of the month to be considered for re-rate at the Trade Show Committee Meeting, the third (3) Wednesday of every month.*

**Request for advancement approved by:**

\_\_\_\_\_  
Training Coordinator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Training Committee

\_\_\_\_\_  
Date