

Internal Organizing - Assessment Form

Contacted By

Contact Date

Doctor Name

Job Title

Workplace

Home or Cell Phone

Home Address

Personal E-mail

Assessment

Need Help? Contact your labor rep or call 1-800-622-0909.

1-Signed Card

3-Thinking About It

5-Refused Membership

Needs Follow Up?

Will Help Organize Others?

Time/Day Next Meeting

Yes

Yes

No

No

What are the Issues of Interest?