



ONA LOCAL 80

HAVE YOUR SAY QUESTIONNAIRE

Name: _____

Unit: _____

Site: _____

Status: (FT, PT, Casual) _____

1. What article of the Local Agreement would you like to see changed?

2. How would you like to see it changed?

3. Is there something new you would like to see in the local agreement? (Remember that the local agreements do not deal with salaries, benefits, etc.)

Return responses to ONA, H Wing, Room 214-215 or fax to ONA at 416-480-6867 or e-mail to Paul.Lostracco@sunnybrook.ca

4. Would you like to see changes to Article P. 4 (e) Reassignment language and how reassignment is done?

Yes

No

If yes, explain how.

5. Any other suggestions?

PLEASE RETURN NO LATER THAN FEB 10, 2023.