

FOLLOW-UP REGARDING SKILLED WORKER JOB POSTINGS

Questionnaire to be filled out each time that a skilled worker job position is posted, for both job titles that are covered by the 10% premium, as well as for those that are not covered by it. Some data might be difficult to collect. However, please try to answer as many questions as possible in view of the information that is available.

1.	UNION FULL NAME:
	Example: "Syndicat des travailleuses et des travailleurs du Lieu de travail XYZ"
2.	CSN'S UNION NO.:
	CSN's Union No. must all be in the following form: "12-34-567"
3.	SECTOR:
	Health and Social Services
4.	JOB CLASSIFICATION:
5.	JOB POSTING NO.:
6.	POSITION:
	Full-Time
	Regular Part-Time
	Recall List
	Temporary Workload Increase
7.	SHIFT:
	Day
	Evening
	Night
	Rotation
8.	FOR HOW MANY WEEKS WAS THE POSITION POSTED (ORIGINAL POSTING AND ANY SUBSEQUENT POSTINGS INCLUDED)?

9.	POSTING PE	RIOD:
	FROM:	TO:
10.	HOW MANY	SUBSEQUENT POSTINGS WERE NECESSARY?
11.	WAS THE 109	% PREMIUM INDICATED ON THE JOB POSTING?
	Yes	
	No	
12.	NUMBER (AF	PPROXIMATE) OF JOB APPLICATIONS RECEIVED:
13.	WAS THE PO	SITION FILLED?
	Yes —	IF POSITIVE, PLEASE SPECIFY THE AGE (APPROXIMATE) OF THE CANDIDATE RETAINED:
	No	
		DID THE CANDIDATE COME FROM THE PUBLIC OR PRIVATE SECTOR?
		□ Public
		☐ Private
		DID THE RETAINED CANDIDATE SATISFY THE POSITION'S NORMAL JOB REQUIREMENTS?
		□ Yes □ No
		STING INVOLVE A NEW POSITION?
	Yes No	IF NOT, WHY DID THE PREVIOUS INCUMBENT IN THE POSITION LEAVE THE POSITION?
	NO	Retirement
		age (approximate) of the employee that left:
		Left for a job in another sector (private) age (approximate) of the employee that left:
		☐ Left for a job in another sector (public)
		age (approximate) of the employee that left: ☐ Change of position within the same establishment
		☐ Leave that was authorized by the collective agreement
		Other
		please specify:
15.	OTHER COM	MENTS:

Please return each completed form to the e-mail address <u>infoccspp@csn.qc.ca</u> or fax it to 514 529-37OI