

## JRD Reimbursement Policy

**Executive Director, Controller and Administrative Staff are responsible for administering this policy.**

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Implementation Date: April 24, 2024

Date of Last Revision: April 24, 2024

### **Purpose:**

The purpose of this policy is to ensure that active UA Local 170 members receive JRD reimbursements that they are eligible for. It is also to ensure that no JRD reimbursements are issued to members that do not qualify.

### **Procedure for JRD Reimbursements:**

1. No member is automatically eligible for JRD reimbursements. The amounts are also subject to review.
  
2. A UA 170 member may be eligible to a reimbursement if:
  - The member is in good standing and provides written confirmation that they are actively, currently working on a UA 170 signatory contractor site (via *JRD Reimbursement Requisition Form*) or,
  - The member is in good standing and provides adequate written explanation as to why they are not working for a UA 170 signatory contractor and attaches it to the relevant requisition form,
  - The Member is working for a commercial contractor or is on the "out of work" commercial board
  - The certification taken meets the minimum standard (Energy Safety Canada or Equivalent),

Potential reasons a reimbursement/payment might be refused include, but are not limited to:

- a. Member has not worked a minimum of 900 hours with a UA 170 signatory contractor,
  - b. Member is currently working, or has at any point since initiation into UA 170 worked for a non-union company,
  - c. Member is working for a non-commercial contractor,
  - d. Member is not listed on the "out of work" commercial board,
  - e. Member has already received reimbursement for the expense claimed,
  - f. Member has not included all documentation,
  - g. Member took training at an unrecognized/unaccredited provider,
  - h. Previous or current disciplinary review, and/or
  - i. A false declaration on the *JRD Reimbursement Form*
3. Included with the *JRD Reimbursement Form* the member must submit:
- Proof of payment – Receipt must include member's name
  - Proof of successful completion
4. Should a member receive reimbursement or payment without having met the above conditions, the member will be expected to repay the funds **IN FULL** and may be subject to re-initiation/re-instatement fees in the future.
5. Members residing 100 kms or greater from UAPICBC Delta Campus do not need permission ahead of time to obtain reimbursement for training from a recognized training provider. Reimbursement costs will not exceed equivalent fees charged at UAPICBC.

**Items eligible for JRD reimbursement:**

Hearing Test - \$50.00

Confined Space Awareness - \$100.00

Fall Protection - \$150.00

Elevated Work Platform - \$200.00



# JRD Reimbursement Requisition Form

Please complete all fields:

FULL NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

CELL NUMBER: \_\_\_\_\_ UA CARD NO: \_\_\_\_\_

**PLEASE NOTE:** All receipts must be submitted within 18 months of payment. Please submit a receipt and proof of completion.

	<u>AMOUNT PAID (\$)</u>
a) HEARING TEST (\$50.00)	_____
b) CONFINED SPACE AWARENESS (\$ 100.00)	_____
c) FALL PROTECTION (\$150.00)	_____
d) ELEVATED WORK PLATFORM (\$200.00)	_____

## UA LOCAL 170 MEMBER VERIFICATION

I have read and understood the *JRD Reimbursement Policy*. I am currently working for a UA 170 signatory contractor, or have attached a written explanation as to why I am not. My union dues are up to date. I understand that a false declaration on this form may result in financial penalties. I have attached both a copy of the invoice paid, as well as proof of completion.

\_\_\_\_\_  
(UA local 170 member's Signature)

\_\_\_\_\_  
(Date)

## UAPICBC STAFF MEMBER VERIFICATION:

\_\_\_\_\_, is a member in good standing with UA Local 170, and I have verified this member meets the conditions laid out in the *JRD Reimbursement Policy*.

\_\_\_\_\_  
(UAPICBC Staff Name and Signature)

\_\_\_\_\_  
(Date)