

How to Submit Your Electronic Membership Application (EMA)

Guide for OPSEU/SEFPO Members

Find out about this easy-to-use online alternative to the PDF version of the Membership Application form. It is online, and it is available through our web site <https://opseu.org> (EMA-Web) and through our Member Portal <https://members.opseu.org> (EMA-Portal).

Both EMA-Web and EMA-Portal will ultimately become the primary method for membership application. Our goal is to completely replace the use of PDF or paper forms. This will allow to greatly reduce the processing time from the moment you submit application to the moment you hold your membership card in your hands.

Tip: If you are a signed-up OPSEU/SEFPO member and have already completed a Membership Application form with your most current contact and job information, then you are not required to complete another form online. However, if there is a change in your job status or contact numbers, you are very welcome to use EMA to update our database with your most recent information. In addition, brought by the popular demand, we have included a new section in the form which provides you with the ability to subscribe for information from our equity caucuses and committees.

EMA through the Portal

Consider the following prior to submitting or resubmitting a membership application form: if you have not registered for the OPSEU Member Portal, this would be an ideal opportunity to become a registered portal member.

What is OPSEU/SEFPO Member Portal

OPSEU/SEFPO Member Portal is a self-service space and tool that provides secure access to your personal profile and OPSEU information relevant to you. Through the portal, members can:

- submit a membership application
- update their mailing address and email

- update information about dependents
- review their job information on record, including job status
- view their collective agreement
- sign up for direct deposit
- submit expense claims
- view important documents, for example family care and advance forms
- register for events
- view any local executive committee positions held
- view the names and contact information of their local executive committee
- send feedback

How to Sign up for the Member Portal

For detailed instructions on how to become Member Portal user, please check the last section in this document: [How to sign up for the Member Portal](#)

Member Portal Link

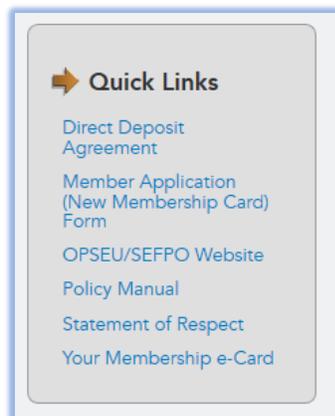
<https://members.opseu.org>

EMA-Portal process explained

You will need to submit electronic membership application through Member Portal, if:

- you want to be a signed OPSEU/SEFPO member and obtain union membership card
- you want to replace your union membership card (changed name, lost card)
- your job status has changed

Find the link to the **Member Application (New Membership Card) Form** under Quick Links in your member profile:



Click on the link and the form will open in a separate browser tab (window).

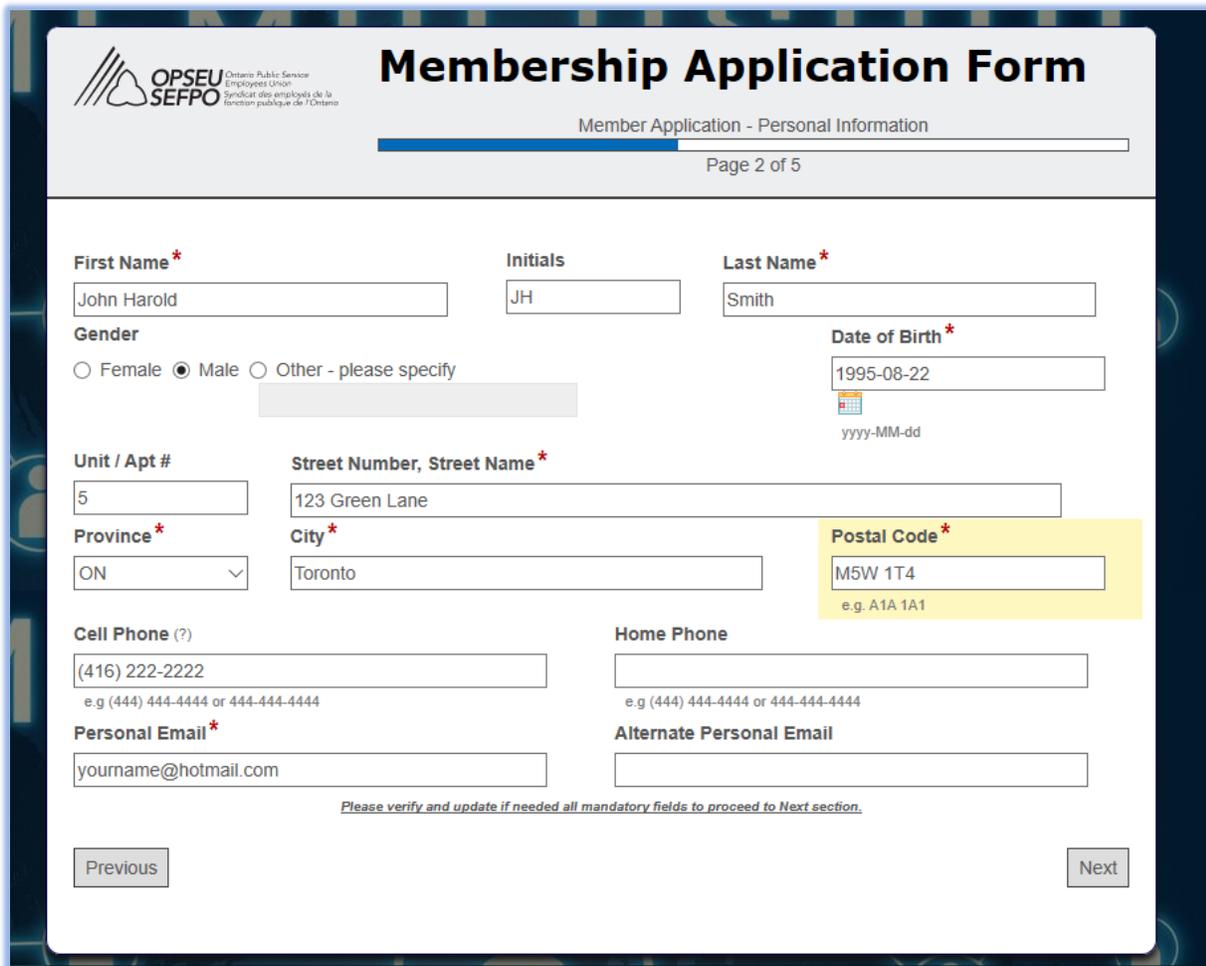
EMA-Portal: page one

Note: All the fields that are already stored in your member profile, will be pre-populated on the form.

Fields marked by a red asterisk * indicate a mandatory field and require information before you can move forward in the application process.

The "Next" button will not be displayed at the bottom right of the page until you complete **all** mandatory fields marked by an asterisk.

Carefully review the details entered in the form and note any error messages. Correct the error, **tab out** or click outside the cell, and proceed. The "Next" button will then be displayed. The "Next" button will only display when all required fields are complete and accurate.



Membership Application Form
Member Application - Personal Information
Page 2 of 5

First Name * John Harold **Initials** JH **Last Name *** Smith

Gender
 Female Male Other - please specify

Date of Birth * 1995-08-22
yyyy-MM-dd

Unit / Apt # 5 **Street Number, Street Name *** 123 Green Lane

Province * ON **City *** Toronto **Postal Code *** M5W 1T4
e.g. A1A 1A1

Cell Phone (?) (416) 222-2222
e.g (444) 444-4444 or 444-444-4444

Home Phone
e.g (444) 444-4444 or 444-444-4444

Personal Email * yourname@hotmail.com **Alternate Personal Email**

Please verify and update if needed all mandatory fields to proceed to Next section.

Previous Next

Click "Next" to go to page two.

EMA-Portal: page two

Unlike the first page, all the fields on the second must be filled out by you. They are related to your most recent job position and work contact information.



Membership Application Form

Member Application - Job Information

Page 2 of 4

Where do you work?*

Select your employer

Clicking on the Employer field will display a list of employers to choose from, navigate through the list and choose your employer, or type part of your employer's name and the list will filter to your possible selections

<p>Work address: street number, street name</p> <input type="text"/>	<p>Work address: city</p> <input type="text"/>	
<p>Job title*</p> <input type="text" value="Social Worker"/>	<p>Employee number (?)</p> <input type="text" value="647"/>	<p>Date of hire* (?)</p> <input type="text" value="2020-03-10"/> <p><small>yyyy-MM-dd</small></p>

Your OPSEU Local

Select your OPSEU local

Your nearest OPSEU Regional Office*

Based on your selection of employer, OPSEU Local and nearest OPSEU Regional Office may auto-populate. If they don't and if you don't know your local number, please select at least your nearest OPSEU Regional Office.

You work in the Broader Public Sector (BPS)

What is your job status?*

Full-time
 Reg. Part-time
 Relief/Casual

Please fill in all mandatory fields to proceed to Next section.

Required fields are marked with an asterisk and must be completed before you can proceed to the next page.

Place your cursor on the 'Where do you work?' field and a list of employers will be displayed alphabetically. If you begin typing your workplace or employer name, the list will filter those employer names that contain the information you have entered.

Where do you work? *

- District Of Parry Sound Social Services Ad ministr ation Board
- Ministry of Agriculture, Food and Rural Affairs
- Ministry of Children and Youth Services - Corrections
- Ministry of Children and Youth Services - Unified
- Ministry of Children, Community and Social Services
- Ministry of Citizenship and Immigration
- Ministry of Colleges and Universities
- Ministry of Community and Social Services
- Ministry of Consumer Services
- Ministry of Culture

You may continue typing your employer name as you see it displayed or move the mouse to select the entry and click. You may also use the scroll function on your mouse or on the right side of the list. Once you have selected your employer, move the mouse or tab out to the Work address section and provide additional details that will be helpful in identifying your workplace. Although these fields are not mandatory, they are helpful additions for those who work at various locations:

100 Yonge Street

Work address: city

Toronto

Continue to the next section, Job title, Employee number and Date of hire:

Job title *	Employee number (?)	Date of hire * (?)
Clerk	233651	2020-01-13

The Job Title field is a free text field to enter your job title. If you hover your mouse over the question mark (?) symbol beside the Employee number field, it provides additional information about the field. The additional information in the Date of hire field is that if you do not know your exact Date of Hire, you can indicate the first of the month you were hired.

The next section asks for your Local and Job status information. As explained earlier, in many cases the Local field will be automatically populated based on the selection in "Where do you work?" field. For example, if you work at the District of Parry Sound Social Services Administration Board, then your OPSEU/SEFPO Local is automatically populated as 324:

Where do you work?*

District Of Parry Sound Social Services Administration Board

Select your employer

Clicking on the Employer field will display a list of employers to choose from, navigate through the list and choose your employer, or type part of your employer's name and the list will filter to your possible selections

Work address: street number, street name

Work address: city

Job title* **Employee number (?)** **Date of hire* (?)**

yyyy-MM-dd

What is your OPSEU local?*

324 - DistrictOfParrySoundSocialServicesAdminBoard/CommunityLivingParrySound

Select your OPSEU local

Based on your selection of employer, this field may auto-populate with your local or with a list of locals where your employer is represented. If you don't know your local number, please find out from your union steward.

You work in the Broader Public Sector (BPS)

What is your job status?*

Full-time Reg. Part-time Relief/Casual

Please fill in all mandatory fields to proceed to Next section.

If you, however, do not see the local field populated by the system, this means that your employer is linked to multiple locals and you must find out which one is yours. Scroll through the list to select. The list provides some descriptions, but it is always best to seek assistance from your unit steward or regional office staff prior to submitting the application. Refer to the section "[Before you begin..](#)" earlier in this document. This is to confirm that the information you provide reflects your local accurately.

What is your OPSEU local?*

527 - 400-505Univ655BayMOL-CultTrism-WSIAT10Adelaid-CMHA

Select your OPSEU local

Based on your selection of employer, this field may auto-populate with your local or with a list of locals where your employer is represented. If you don't know your local number, please find out from your union steward.

The last section of page three is the Job status. Please make one selection and "Next" will display for you to proceed.

You work in the Ontario Public Sector (OPS)

What is your job status? *

Full-time
 Flexible Part-time
 Fixed Term
 Student
 Reg. Part-time

Please fill in all mandatory fields to proceed to Next section.

EMA-Portal: page three

Page three provides you with the option to subscribe for additional information from OPSEU/SEFPO equity committees and caucuses. Each option provides a drop-down arrow to expand the section. In each section there is a brief description of the committee as well as a checkbox allowing you to sign up for more information:



Membership Application Form

Member Application - Equity Information

Page 3 of 4

Choose which committee or caucus you are interested to know more about:

- Provincial Womens Committee ▼

- Provincial Young Workers Committee ▼

- Provincial Human Rights Committee ▲

- PHRC**

The PHRC assists in establishing local and other human rights committees within Ontario and in OPSEU's regions. It develops and promotes programs that encourage all members to participate in Union activities, and increases awareness and understanding of workplace, community, national and international human rights issues.

I would like to receive more information about this committee

- Provincial Francophone Committee ▼

- Indigenous Circle ▼

- Coalition of Racialized Workers ▼

- Disability Rights Caucus ▼

- Rainbow Alliance arc-en-ciel ▼

Provincial Human Rights Committee ▼

Provincial Human Rights Committee ▲

PHRC

The PHRC assists in establishing local and other human rights committees within Ontario and in OPSEU's regions. It develops and promotes programs that encourage all members to participate in Union activities, and increases awareness and understanding of workplace, community, national and international human rights issues.

I would like to receive more information about this committee

Leaving the box unchecked will remove you from the subscriber list if you have previously been a subscriber for information from that committee. After your selection, you may proceed with "Next".

EMA-Portal: page four (final)

Page four and final section of the application is where you will find the Members Oath, Affinity box, Recruiter, Membership card request and the signature fields:



Membership Application Form

Member Application - Consent

Page 4 of 4

Members Oath*

I hereby request and accept membership in the Ontario Public Service Employees Union. I authorize OPSEU to act as my exclusive bargaining agent in all matters pertaining to my employment relationship with my employer. I solemnly promise to uphold and obey the Constitution and By-laws of this Union, to assist my fellow members to improve their economic, political and social conditions, to uphold the principles of democracy and fair play, and to do no deliberate wrong or harm to any member of this Union.

I certify that I have read and understood the above statements.

AffinityBox

While OPSEU does not sell or otherwise provide personal information to third parties, the union periodically provides information to members about union approved group affinity programs (i.e. cell phones, home/auto insurance etc.), in accordance with the Privacy Act, if you do not wish to receive this type of information, please mark box below:

I do not wish to receive group affinity program information

Recruiter

Who assisted you with this application?

LEC Member

OPSEU Staff Representative

OPSEU Regional Office

Colleague/Steward

Do you require new membership card?*

Let us know if you need a new card or a new replacement membership card.

By submitting this form, I hereby acknowledge that all the information given above is true to the best of my knowledge.

Signature*

John P. Smith
✕

↓

Date of Submission*

11/5/2020
📅

Previous

Submit Application

Members Oath *

I hereby request and accept membership in the Ontario Public Service Employees Union. I authorize OPSEU to act as my exclusive bargaining agent in all matters pertaining to my employment relationship with my employer. I solemnly promise to uphold and obey the Constitution and By-laws of this Union, to assist my fellow members to improve their economic, political and social conditions, to uphold the principles of democracy and fair play, and to do no deliberate wrong or harm to any member of this Union

I certify that I have read and understood the above statements.

AffinityBox

While OPSEU does not sell or otherwise provide personal information to third parties, the union periodically provides information to members about union approved group affinity programs (ie. cell phones, home/auto insurance etc.). In accordance with the Privacy Act, if you do not wish to receive this type of information, please mark box below:

I do not wish to receive group affinity program information

Please read the Members Oath and check the box indicating you have read and understood the statements.

Members Oath *

I hereby request and accept membership in the Ontario Public Service Employees Union. I authorize OPSEU to act as my exclusive bargaining agent in all matters pertaining to my employment relationship with my employer. I solemnly promise to uphold and obey the Constitution and By-laws of this Union, to assist my fellow members to improve their economic, political and social conditions, to uphold the principles of democracy and fair play, and to do no deliberate wrong or harm to any member of this Union

I certify that I have read and understood the above statements.

If you do **not wish** to receive the affinity program information, please check the box next to “I do not wish to receive group affinity program information”, as in the screenshot example below.

AffinityBox

While OPSEU does not sell or otherwise provide personal information to third parties, the union periodically provides information to members about union approved group affinity programs (ie. cell phones, home/auto insurance etc.). In accordance with the Privacy Act, if you do not wish to receive this type of information, please mark box below:

I do not wish to receive group affinity program information

If anyone provided you with assistance in completing your electronic membership application, please indicate by selecting the applicable box.

Recruiter

Who assisted you with this application ?

LEC Member

OPSEU Staff Representative

OPSEU Regional Office

Colleague/Steward

Membership card

If you wish to receive a membership card, select “Yes” from the drop down box.

Do you require new membership card? *

Yes

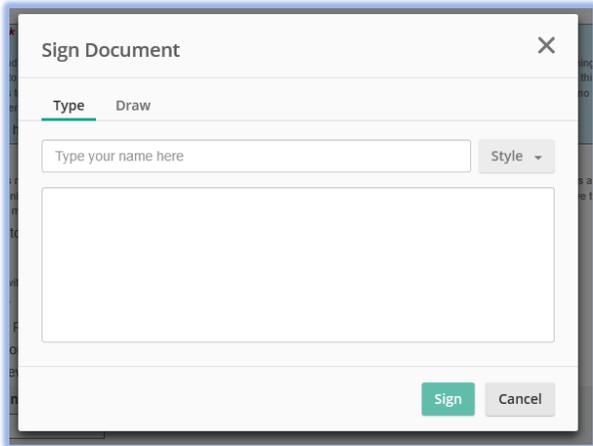
Let us know if you need a new card or a new replacement membership card.

Signature

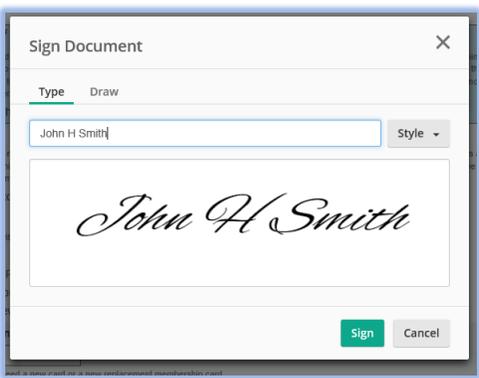
By submitting this form, I hereby acknowledge that all the information given above is true to the best of my knowledge.

Signature * **Date of Submission ***

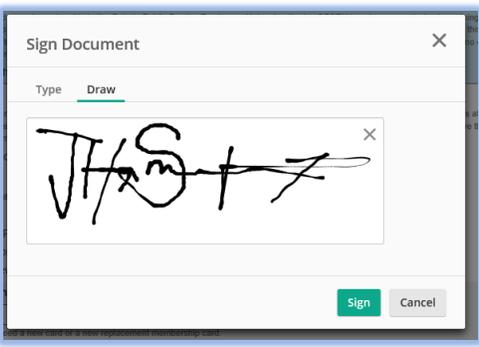
The signature section requires your signature and a date stamp of the submission (the date you completed the EMA). Click on the "Sign" button and proceed to providing a signature either in the form of typing it, or in the form of drawing it (if application is done on a touch screen device such as cell phone or tablet):



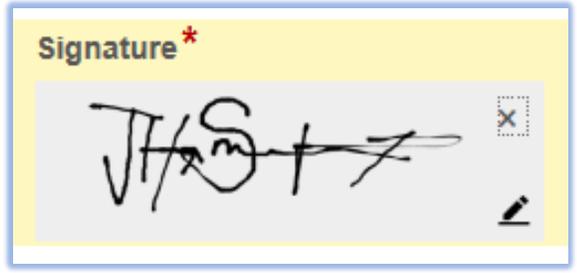
Select "Type" to enter your name in the box provided and select style from the drop down option to make it look as you prefer. The stylized signature text will be displayed.



You may also select "Draw":



Click on "Sign" to complete the signing process. The result may look like one of these screens:

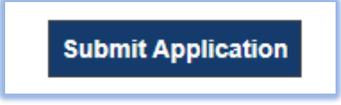


EMA-Web: Review, Edit, Confirm and Submit

Before submitting your application, you now have an opportunity to review the details you have entered and make any corrections. Use the "Previous" button to go back through your Application details. This will ensure your member profile is accurate and assists us in identifying you each time you have a question or require information.

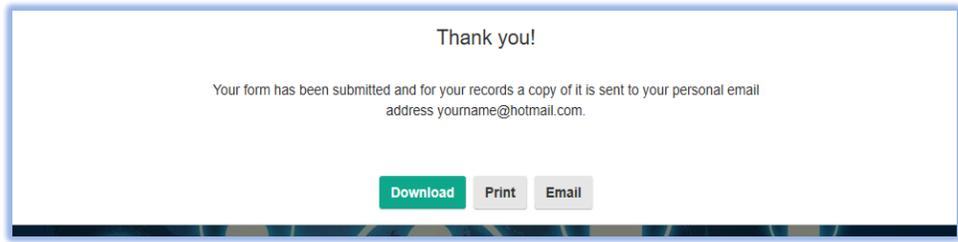
It is very important to review.

Your personal information will not be shared outside of OPSEU/SEFPO.



If you are confident with the information you have provided, select "Submit Application" button.

You will receive the following information on your screen



You have the options to save, print or email the completed application. The application will also be displayed in its entirety on the same screen. Here is a preview:

Thank you!

Your form has been submitted and for your records a copy of it is sent to your personal email address yourname@hotmail.com.

[Download](#)
[Print](#)
[Email](#)



Membership Application Form

Membership Application - Union Number

Do you know your OPSEU issued Member Union Number? *

Yes No

Member Application - Personal Information

First Name *	Initials	Last Name *	Date of Birth *
John Harold	JH	Smith	1995-08-22
Gender			yyyy-MM-dd
<input type="radio"/> Female <input checked="" type="radio"/> Male <input type="radio"/> Other - please specify			
Unit / Apt #	Street Number, Street Name *		
5	123 Green Lane		
Province *	City *	Postal Code *	
ON	Toronto	M5H 1T4	
		e.g. A3A 1A1	
Cell Phone (*)	Home Phone		
(416) 222-2222	e.g. (416) 444-4444 or 444-444-4444		
Personal Email *	Alternate Personal Email		
yourname@hotmail.com	yourname@gmail.com		

Please verify and update if needed all mandatory fields to proceed to next section.

Member Application - Job Information

Where do you work? *

Ministry of Colleges and Universities

Select your employer

Clicking on the Employer field will display a list of employers to choose from, navigate through the list and choose your employer, or type part of your employer's name and the list will filter to your possible selections

Work address: street number, street name

100 Yonge Street

Work address: city

Toronto

Job title *

Employee number (*)

00001

Date of hire (*)

Tip: You will receive an email confirmation of your submission with the completed form attached, for your records, sent to your primary email address as provided on page two of the application.



Once the application is reviewed and vetted by OPSEU/SEFPO Membership Services, you will receive another confirmation email with temporary membership e-Card attached.

A plastic membership card will be sent via regular mail to your home. It is important to provide a complete mailing address, including street number and name, the unit/apartment/suite number (if applicable), city, province, and postal code.

Close the browser tab or screen to exit the process.

Congratulations on submitting your electronic membership application!

How to Sign Up for the Member Portal

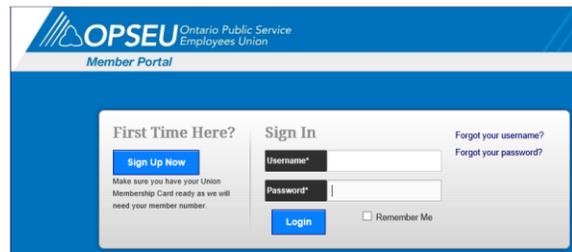
Before you begin

You will need the following information in order to register successfully and gain access to the OPSEU/SEFPO Member Portal: you need to know your **OPSEU Union Number** and you need to know your **First Name** and **Last Name** exactly as they are entered in our membership database. Existing members can find this information on their OPSEU/SEFPO Membership Card. If you don't have a card yet, or if you need further help, you can call the nearest OPSEU/SEFPO regional office for assistance.

Once you have the necessary information at hand, open a Web browser and go to:

<https://members.opseu.org>

Click on the **[Sign Up Now]** button, then fill in the sign-up form as required:



Sign up information help

Union Number: Enter your OPSEU Union number.

First Name: Enter your first name as recorded in our membership database.

Last Name: Enter your last name as recorded in our membership database

Personal Email: Do NOT use employer email address.

Username: Create a valid username. (Note: you are free to create any logon name you wish. It does not have to be the same as your actual name. For example, you can use your Union number as your username.)

Password: Create a valid password.

Confirm Password: Re-enter the password

Keep this information safe and do not share it with anyone.

Once you have registered – you can sign in using the username and password you created.

Registration

Please fill in all of the fields below to register. As part of the registration process, we will send you a link to confirm your email address.

When providing your personal email, please do not use an employer email address.

Who are you?

Union #*

First Name*

Last Name*

Personal Email*

Create a new account

Username*

Password*

No Password Entered

Confirm Password*

Register