

Payroll Deduction Authorization/ Associate Membership Application

(please print clearly) Last			
41		First	M.I.
Department:			
PSU ID:	Home/Ce	Home/Cell Phone:	
Rank and Job Title:	Non-PSU	Email:	
			@ pdx.edu
	Associate Membe	rship	
Member Dues Deduction is checke	d and signed below. Signature of Member	Date	
	Associate Member Due	s Deduction	
	Associate Member Due		nittance of Associate
☐ As an Associate memmember dues.			nittance of Associate
member dues. Through my signature below I requirement the same as regular memoremain in effect and be irrevocable this authorization and shall be renewal.		rom my wages an amount eq accordance with the CBA Ar n August 1 and August 30 of	ual to associate member dues, ticle 10. This authorization shall the year following the date of

This form is to be used by PSU employees who wish to become Associate members of PSU-AAUP who are not currently in the AAUP bargaining unit who are not currently Associate members.

Member dues and representation fees cover PSU-AAUP membership; membership in the National AAUP and in the Oregon Conference of the AAUP (AAUP-OR); and, since AAUP is an affiliate union of the American Federation of Teachers (AFT), access to a variety of AFT individual member benefits.

Member dues and representation fees are 1.164% (as of Jan. 1, 2021) of all wages paid monthly. Member Dues and representation fees may increase yearly to cover increases in dues adjustments by our affiliates.