PORTLAND STATE UNIVERSITY
American Association of University Professors
Promoting Quality Higher Education – An Investment in Oregon's Future

Payroll Deduction Authorization/ Membership Application

Name: _____
(please print clearly) Last First M.I.

Department: _____

PSU ID: _ _ _-_ _ _ -_ _ _

Date of Hire: _____

Home/Cell Phone: _____

Non-PSU Email: _____

PSU Email: _____ **@ pdx.edu**

Select One:

- ☐ **Academic Professional**
- ☐ **Tenure Track (TT)**
- ☐ **Tenured (T)**
- ☐ **Non-Tenure Track Instructional (NTTF-I)**
- ☐ **Non-Tenure Track Research (NTTF-R)**
- ☐ **Fixed Term (FT)**

Choose to become a Member or Voluntary Representation Fee Payer

Membership

☐ **YES! I choose to be a member of PSU-AAUP, with the right to share in decision making, and the right to vote on all matters, in which PSU-AAUP operates**. Membership becomes valid only if Member Dues Deduction is checked and signed below.

_____
Signature of Member Date

Member Dues Deduction

☐ **As a member of PSU-AAUP, I authorize withholding and remittance of member dues.**

Through my signature below I request and authorize the University to deduct from my wages an amount equal to regular member dues, as noticed by PSU-AAUP and in accordance with the CBA Article 10. This authorization shall remain in effect and be irrevocable until the 30-day cancellation period between August 1 and August 30 of the year following the date of this authorization and shall be renewed yearly thereafter unless I notify the Association, in accordance with its Bylaws, of my desire to cancel the deduction of member dues during the next cancellation period.

_____
Signature of Member Date

OR

or

Voluntary Representation Fee Deduction

☐ **I agree to pay voluntary representation fees to PSU-AAUP**. I do not wish to be a member of PSU-AAUP, but I support the work and value provided by PSU-AAUP. I want to contribute my share of the costs of bargaining and enforcing the collective bargaining agreement, and PSU-AAUP's work in advocating on behalf of higher education and higher education workers. Voluntary representation fees are the same payroll deduction percentage as member dues.

Through my signature below I request and authorize the University to deduct from my wages an amount equal to the regular voluntary representation fees, as noticed by PSU-AAUP and in accordance with the CBA Article 10. This authorization shall remain in effect and be irrevocable until the 30-day cancellation period between August 1 and August 30 of the year following the date of this authorization. This authorization shall renew yearly thereafter unless I notify the Association, in accordance with its Bylaws, of my desire to cancel the payment of voluntary representation fees during the next cancellation period.

_____
Signature of Voluntary Representation Fee Payer Date

Member dues and representation fees cover PSU-AAUP membership and membership in the National AAUP, the AAUP-Collective Bargaining Congress (CBC), and the Oregon Conference of the AAUP (AAUP-OR). Member dues and representation fees are 1.068% (1.107% on 1/1/19) of all wages paid monthly. Member Dues and representation fees increase yearly to cover increases in dues imposed by our affiliates. Members who assume a new position not in the AAUP Bargaining Unit continue as Associate Members unless they cancel membership in accordance with PSU-AAUP Bylaws.