

United Faculty of Florida-Florida Atlantic University Membership Form

PRINT NEATLY

NAME (Last, First MI) _____

Social Security Number: _____ Department _____
we require the last 4 digits at least

TITLE _____
(ie, Assistant Professor, Professor, Lecturer, Assoc In, University Librarian, Instructor)

CAMPUS LOCATION _____ OFFICE HOURS _____

HOME ADDRESS _____

CITY/STATE _____ ZIP _____

PHONE: Work _____ Home _____

NON FAU E-MAIL _____

UFF dues are one-percent (1 %) of regular salary.

Please enroll me as a member of the United Faculty of Florida (FEA, NEA, AFT, AFL-CIO). I hereby authorize my employer to begin bi-weekly payroll deduction of United Faculty of Florida dues (1% of salary—excluding summer supplemental wages). This deduction authorization shall continue until revoked by me at any time upon 30 days written notice to FAU's payroll office and to the United Faculty of Florida.

Signature (for payroll deduction authorization)

Today's Date

DUES AND CONTRIBUTIONS TO UFF ARE NOT TAX DEDUCTIBLE AS CHARITABLE CONTRIBUTIONS FOR FEDERAL INCOME TAX PURPOSES, BUT MAY BE TAX DEDUCTIBLE AS PROFESSIONAL BUSINESS EXPENSES.

**Please print, fill out, & give this form to a UFF Representative or send by Campus Mail to:
Deandre Poole, UFF-FAU President, School of Communication, FAU, Boca Campus
Contact president@uff-fau.org for any questions. www.uff-fau.org for more info**

By becoming a UFF member you will:

- √ Strengthen the voice of faculty in negotiations;
- √ Support our lobbying efforts for better higher education funding and academic excellence;
- √ Receive professional protection by way of a free \$1 million professional liability policy;
- √ Obtain the right to vote in UFF elections and thereby influence UFF bargaining and legislative priorities;
- √ Gain access to a variety of "members only" workshops, events and services, including free life insurance policies and legal representation;
- √ Receive free professional publications and literature about national higher education issues.