

Application to
JOIN THE UCLA FACULTY ASSOCIATION



**BENEFITS
SALARIES**

**UC POLICIES
LOBBYING**

The Faculty Association at UCLA is a voluntary, dues-supported organization of UCLA Academic Senate members, founded about 30 years ago, with an Executive Board, Bylaws, a dues structure, and a Research Director.

Purposes: The purpose of the FA is to influence the decisions of the University administration and the state legislature that affect faculty salaries, benefits, and working conditions broadly defined.

Relation to the Academic Senate: The FA at UCLA supports the Senate in all academic matters. Because it has no state funding the FA at UCLA can and does engage in lobbying and other nonpartisan political activities on behalf of faculty.

Membership: The FA at UCLA membership is open to all faculty eligible for membership in the UCLA Academic Senate.

I wish to join the Faculty Association at UCLA. I agree to pay the following dues (choose one) by payroll deduction and to sign Form U669 below or by personal check. FA dues are tax deductible: either on Schedule A of your income tax to the extent that they and other profession-related and income-producing expenses exceed 2% of your adjusted gross income; or in some instances on Schedule C without the 2% limitation. Please check with your tax consultant. AAUP members may claim a 20% reduction in FA dues.

- _____ \$8.75 per/mo. for Assistant Professors and Acting Professors of Law
- _____ \$13.50 per/mo. for Associate Professors
- _____ \$18.00 per mo. for Full Professors
- _____ Lecturers with security of employment, please designate the dues that most nearly approximates your salary range
- _____ \$40.00 per year for Emeriti (by check only)
- _____ Recalled Faculty: 50% of the dues for their rank (for example, per year \$42.00 for Assistant Professors; \$63 for Associates; and \$84 for professors (payable by check only)
- _____ 50% discount for Second Member of a Family

Mail Completed Forms to:
FA at UCLA, P.O. Box 33336
Granada Hills, CA 91394

Or Drop in Campus Mail to:
Prof. Jonathan Post, UCLA FA Membership Chair
149 Humanities Bldg. 153005, UCLA

Employee Organization Membership Payroll Deduction Authorization UPAY 669 (10/80)

Organization name: Faculty Association at UCLA Initiation Fees 0 General Assessment 0 Campus UCLA

Last Name _____ First Name _____ Middle Initial _____ Dept. Employed at UC _____

Monthly Deduction: Dues _____ Employee ID _____ Email Address _____

Title at UC _____ Date _____ Action on this Form to Become Effective on Pay Period Beginning _____

I authorize the Regents of the University of California to withhold monthly or cease withholding from my earnings as an employee, membership dues, initiation fees, and general assessment as indicated above. I understand and agree to the arrangement whereby one total monthly deduction will be made by the University based upon the current rate of dues, initiation fees, and general assessments.

I also understand that changes in the rate of dues, initiation fees and general assessments may be made after notice to that effect is given to the University by the organization to which such authorized deductions are assigned and hereby expressly agree that pursuant to such notice the University may withhold from my earnings amounts either greater than or less than those shown above without obligation to inform me before doing so or to seek additional authorization from me for such withholdings. The University will remit the amount deducted to the official designated by the organization. This authorization shall remain in effect until revoked by me allowing up to 30 days time to change the payroll records in order to make effective this assignment or revocation thereof or until another employee organization becomes my exclusive representative.

It is understood that this authorization shall become void in the event the employee organization's eligibility for payroll deduction terminates for any reason. Upon termination of my employment with the University, this authorization will no longer be in effect. This authorization does not include dues, initiation fees and general assessments to cover any time prior to the payroll period in which the initial deduction is made. Payroll deductions including those legally required and those authorized by an employee are assigned priorities. In the event there are insufficient earnings to cover all required and authorized deductions, it is understood that deductions will be taken in the order assigned by the University and no adjustment will be made in a subsequent pay period for membership dues, initiation fees and general assessments.

Employee Signature _____ **Date** _____

For University Use Only Tran Code _____ Employee ID No _____ Date _____ Element No. _____ Bal CD _____ Amount _____

