Washtenaw Community College

Payroll Deduction Authorization

Union Membership Dues

I hereby authorize the College to deduct Local, MEA, and NEA dues, assessments, and contributions as may be determined by the Association. This authorization may be revoked, in writing only, at any time. Monthly payroll deduction shall begin with the last pay in September and continue, if not revoked, for a total of ten (10) equal payments.

509 Professional Faculty  501 Classified Faculty

**Membership Retirement Options:**

MEA/NEA – Retired  MEA/NEA – without Retired

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **MEA+AIM**  **(prior to 2007)** | **MEA w/o AIM** | **MEA+AIM**  **(2007-2011)** | **MEA+AIM**  **(2012-17)** | **MEA+AIM**  **(new members after 2018)** |
| **Monthly dues:** | **Monthly dues:** | **Monthly dues:** | **Monthly dues:** | **Monthly dues:** |
| $93.40 | $92.40 | $94.40 | $94.65 | $95.10 |
|  |  |  |  |  |

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Return completed form to HRM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*For Human Resource Management Use Only*

*Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HRM Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ffective (pay date):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*