



Membership Application

Cuesta College Federation of Teachers

AFT/CFT Local 4909

Please Complete All Sections. Type or Print Neatly!

Name: _____
first m.i. last preferred first name

Division in which you teach: _____

Circle your Primary Campus: North County SLO South County High School: _____

Circle your Status: Permanent (Tenured /Tenure Track) Temporary Circle your Load: Full-Time Part-Time

Home Address: _____
p.o. box or street / apt. # city state zip

Home Phone: _____ Cell Phone: _____ Cuesta Extension: _____

Home Email: _____ Cuesta Email: _____

Preferred Email (circle one): Home Cuesta SSN or Banner ID: _____
(must include SSN or Banner ID #)

I hereby authorize payroll deduction from my salary for the payment and adjustments of professional dues as set by the Cuesta College Federation of Teachers (CCFT) and its affiliated organizations, according to the Constitution and Bylaws of the Cuesta College Federation of Teachers. This authorization shall remain in effect until I revoke it in writing to the Cuesta College CCFT Secretary-Treasurer, and shall be effective as of my next pay warrant following its submission to the employer.

Signature

Date

Dues paid to AFT local may not be deductible for federal income tax purposes; however, under limited circumstances, dues may qualify as a business expense.

Catastrophic Leave Bank (Optional)

I hereby authorize the deduction of _____ (number of days; pro-rated for part-time faculty members) of my sick leave days annually to be a member of the CCFT Catastrophic Leave Bank (CLB). I understand that information regarding the CLB is in Appendix D of the CCFT/District contract and that I can resign from the Bank at any time by writing to CCFT.

Signature

Date

Committee on Political Education (COPE) (Optional)

I hereby authorize payroll deduction from my salary the sum of (circle one) \$10 \$15 \$20 or _____ (amount) per pay period and forwarded to the CCFT COPE Fund beginning the next pay period. This authorization is signed freely and voluntarily. I understand that this money can be used by CCFT to make political contributions, that contributions to COPE are not deductible as charitable contributions for federal income tax purposes, and that I can revoke this payroll deduction at any time by notifying CCFT and the Cuesta College Payroll Office in writing.

Signature

Date

CCFT Use Only

Return to CCFT, c/o Mark Tomes, DSPS, Cuesta College, P.O. Box 8106, San Luis Obispo, CA 93403-8106

Rc'd: _____ Payroll: _____ Human Resources: _____ CCFT db: _____ CCFT#: _____

Council: _____ listserv(s): _____ AFT db: _____ Life Insurance: _____ Binder: _____

Empowering our members to build a stronger union!