

MEMBERSHIP APPLICATION
NEW BEDFORD FEDERATION OF PARAPROFESSIONALS
LOCAL 2378



(PLEASE PRINT)

FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

CELL PHONE: _____

PERSONAL (NON-WORK) E-MAIL: _____

POSITION/TITLE: _____

SCHOOL/BUILDING/ROOM #: _____

EMPLOYMENT STATUS: (CHECK ONE) FULL TIME PART TIME (LESS THAN 20 HOURS/WEEK)

MEMBERSHIP APPLICATION AND AUTHORIZATION FOR DUES DEDUCTION

- I hereby request and accept membership in the New Bedford Federation of Paraprofessionals, Local 2378 and I agree to abide by its Constitution and Bylaws. I authorize the union and its successor or assignee to act as my exclusive bargaining representative for purposes of collective bargaining with respect to wages, hours and other terms and conditions of employment with my employer.
- Effective immediately, I hereby authorize and direct my Employer to deduct from my pay each pay period and transmit to the New Bedford Federation of Paraprofessionals, Local 2378 membership dues in the amount established or revised by the New Bedford Federation of Paraprofessionals, Local 2378 in accordance with the New Bedford Federation of Paraprofessionals, Local 2378 Constitution and By-Laws. There shall be no change in the amount of dues deducted without 60 days prior notice to me by the New Bedford Federation of Paraprofessionals, Local 2378. If for any reason my Employer fails to make a deduction, I authorize the Employer to make such deduction in the subsequent payroll period.

I recognize that my authorization of dues deduction, and continuation of such authorization from one year to the next, is voluntary and not a condition of my employment.

In order to comply with the Internal Revenue Service ruling, be advised that your membership dues are not deductible for federal income tax purposes. However, they may be deductible as ordinary and necessary business expenses.

SIGNATURE: _____ DATE: _____

PAYROLL/TREASURER USE ONLY

- FULL DUES RATE HALF DUES RATE QUARTER DUES RATE EIGHTH DUES RATE

AUTHORIZATION FOR PAYROLL DEDUCTION

To: New Bedford Public Schools

Effective immediately, I _____, hereby request and authorize you to deduct, in forty-two (42) weekly installments, Federation dues from my earnings. This amount shall be paid to the Treasurer of the New Bedford Federation of Paraprofessionals Local 2378, AFT MA, AFT, AFL-CIO, and represents payment of my Federation dues.

Deductions for Federation dues are revocable by the employee upon sixty (60) days advanced written notice to the Treasurer of the New Bedford Federal of Paraprofessionals Local 2378 and the New Bedford School Committee or upon termination of employment with the New Bedford Public Schools.

Payments for the cost of collective bargaining paid to the New Bedford Federation of Paraprofessionals, Local 2378, may not be deducted for federal income tax purposes. However, under limited circumstances, these payments may qualify as a business expense.

Contributions for cope or other purposes to the New Bedford Federation of Paraprofessionals, Local 2378, are not deductible as charity contributions for federal income tax purposes.

Employee Signature _____

Please Print: Name _____

Address _____

City _____

State _____ Zip _____ Tel # _____

School _____

Job Title: Instructional __ Early Childhood (PreK-K) __ Lunch __
Other __

Highly Qualified Status: Degree/48+ credits _____ ParaPro Test _____

Local Assessment _____

Not Highly Qualified _____