



Visit [www.ndunited.org/join](http://www.ndunited.org/join)  
for all membership forms.

# 2018-19 MEMBERSHIP APPLICATION

K-12 Teachers & Education Support Professionals

My membership means:

- I am part of the state's largest union of educators and public employees.
- I support unity and collective action as a pathway toward quality public education and quality public services for all people in our state.
- I benefit from communications and political advocacy as a way to stay connected to and involved with issues affecting our work.

**COUNT ME IN! WE ARE ND UNITED!**

## Local Association

## Work Location/Building

First Name

Last Name

XXX-XX-\_\_\_\_

Social Security Number

Gender

Ethnicity (optional)

- Male     American Indian/Alaska Native     Black/African American  
 Female     Hispanic     Caucasian     Asian     Native Hawaiian/Pacific Islander  
 Multi-Ethnic     Other     Unknown

Home Address

City

State

Zip

( )

( )

Preferred Phone

Home Phone

Mobile Phone

Home     Mobile

Personal Email

Work Email

**Job Classification** (Check all that apply.)

- Teacher/Instructor     Counselor     Library/Media     Therapist     Coach  
 Paraprofessional/Aide     Transportation     Food Service     Office Personnel  
 Custodial     Security     Maintenance     Administrator     Other \_\_\_\_\_

/ /

/ /

Subject Area

Date of Birth

Hire Date

**PAYMENT METHOD** (Dues and contribution totals determined on reverse side.)

**ACH** (Complete this authorization and attach a voided check.)

Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Bank Name:	
Bank Routing Number:	
Bank Account Number:	

**Payroll Deduction** I authorize my employer to deduct local, NDU and national dues assessments and other contributions. If employer fails to deduct, I will pay NDU directly. (May require additional form.)

**Cash/Check Payment**

I hereby apply for membership in North Dakota United and its local and national affiliates, the National Education Association and the American Federation of Teachers. I agree that the dues shall continue from year-to-year unless revoked in writing by me prior to September 30. If for any reason my employment is terminated prior to August 31, my dues obligation will cease. I also understand that the annual dues for continuing membership are subject to change. The notes on the reserve side are incorporated into this application.

Signature

Date

**JOB TITLE** (*Pick one that most represents your work.*)

**K-12 Teaching Professional:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Classroom Teacher        | <input type="checkbox"/> Administrator      | <input type="checkbox"/> Coach                  |
| <input type="checkbox"/> Special/Developmental Ed | <input type="checkbox"/> Speech/Hearing     | <input type="checkbox"/> Occupational Therapist |
| <input type="checkbox"/> Counselor                | <input type="checkbox"/> Psychologist       | <input type="checkbox"/> Curriculum Specialist  |
| <input type="checkbox"/> Library Media Specialist | <input type="checkbox"/> Reading Specialist | <input type="checkbox"/> Other _____            |

**Education Support Professional:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Clerical Service        | <input type="checkbox"/> Health/Student Service | <input type="checkbox"/> Skilled Trades    |
| <input type="checkbox"/> Custodial & Maintenance | <input type="checkbox"/> Paraeducators          | <input type="checkbox"/> Technical Service |
| <input type="checkbox"/> Food Service            | <input type="checkbox"/> Security Services      | <input type="checkbox"/> Transportation    |

**1) What year did you enter the profession?**

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(YYYY)

**2) I am:**

- Already a member
- Transferring from another district
- Joining the Association today
- Interested in receiving more information about membership

**3) Our Association provides resources and support to educators to ensure student success. How can we help you in your career and practice as an educator?**

- Student Behavior/Classroom Management
- Curriculum Assistance
- Access to Mentors and/or Coaches
- Working with Parents
- Working with Administrators
- Understanding Your Evaluation / Observation Process

**4) Our Association works to ensure every school provides our students with the opportunities to succeed. Which of the following issues are most important to you?**

- Social and Racial Justice
- Economic Justice
- Parental and Community Engagement
- Fully-funded Schools
- Conditions in the Workplace
- Education Policy—*policy that impacts your school at the local, state or national level*
- Political Advocacy—*advocate for policies that ensure all students get the opportunities they deserve*

**5) Our Association advocates for conditions that retain high-quality educators for students. Which of these are you interested in learning about?**

- Compensations & Contracts
- Educator Rights & Responsibilities
- Health Care & Insurance
- Pension & Retirement Benefits
- Student Debt
- Stretching Your Paycheck

**K-12 TEACHERS MEMBERSHIP TYPES**

	<b>CODE</b>
Active Professional FT	AC-1-100
Active (employed 26% to 50%)	AC-1-50
Active (employed 25% or less)	AC-1-25
Pre-Retired	RT-9-7
Reserve (former Active)	RS-1-0
Reserve (former Educational Support)	RS-2-0
Retired Annual	RT-8-0
Retired Lifetime	RT-7-7
Student	ST-0-0
Substitute (not in a bargaining unit)	SB-0-0

**K-12 ESP MEMBERSHIP TYPES**

	<b>CODE</b>
\$53,500 or more	AC-2-100
\$46,500 - 53,499	AC-2-100
\$39,500 - 46,499	AC-2-100
\$32,500 - 39,499	AC-2-100
\$25,500 - 32,499	AC-2-50
\$15,001 - 25,499	AC-2-50
\$15,000 or less	AC-2-25

**COST**

\$610.52
\$305.26
\$152.63
\$466.00
\$104.50
\$67.00
\$61.00
\$466.00
\$39.00
\$45.00

**1. State and National Dues** — Enter the amount that coincides with your membership type, listed to the left. Total includes membership in NDU, NEA and AFT. State dues include a \$4 assessment for the NDU Foundation and an assessment to market public relations (Active - \$12, Retired - \$12, and Student - \$1). Members may request a refund for the NDU Foundation special assessment.

**2. Local Dues** — This amount is determined by your local association. Ask your recruiter for this total.

**3. United PAC** — A \$10 contribution to UPAC is included as part of the "Every Member Option." A member may contribute more than the amount printed. A member not wishing to contribute to UPAC should initial the appropriate statement.

**4. NEA FCPE** — The NEA Fund for Children and Public Education (NEA FCPE) and the United Political Action Committee (UPAC) collect voluntary contributions from Association members that are used for political purposes, including, but not limited to, making contributions to and expenditures on behalf of friends of public education and public service, who are candidates for federal, state and local office. Only U.S. citizens or lawful permanent residents may contribute to these funds.

Contributions to these funds are voluntary. Making a contribution is neither a condition of employment nor membership in the Association, and members have the right to refuse to contribute without suffering any reprisal. A member may contribute more or less than the suggested amount, or may contribute nothing at all, without affecting his or her membership status, rights or benefits in NEA, NDU, AFT or any other affiliates. Contributions to these funds are not deductible as charitable contributions for federal income tax purposes.

Federal law requires NDU to use our best efforts to collect and report the name, mailing address, occupation, and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year.

Should you choose to make an additional contribution, you are attesting that you understand that you are making a joint contribution to the NEA Fund and UPAC, and that 20% of your contribution will be given to the NEA Fund and that 80% will be given to the UPAC.

**5. NDU Foundation** — Contribute to a 501(c)(3) charity that provides scholarship and grants to prospective members and grants to prospective members.

**Dues and Contribution Type:**

	<b>Amount:</b>
Dues (State and National) <sup>1</sup>	_____
Local Dues <sup>2</sup>	_____
United PAC <sup>3</sup>	<u>  \$10  </u>

*If you do not wish to contribute to UPAC, initial here:* \_\_\_\_\_

NEA-FCPE<sup>4</sup> \_\_\_\_\_

NDU Foundation<sup>5</sup> \_\_\_\_\_

Total Yearly Amount: \_\_\_\_\_