



AAUP-Hofstra University Chapter
127 Hofstra University
137 Monroe Hall
Hempstead, NY 11549

Office Hours: Tuesdays & Wednesdays, 11:00 am – 4:00 pm
Phone: 516-463-5409
Email: aauphofstra@gmail.com
Website: <http://www.aaup-hofstra.org>

AAUP MEMBERSHIP/PAYROLL AUTHORIZATION FORM: ADJUNCT FACULTY
Please fill out the information below and select a payment option.

Last Name: _____ First Name: _____

Hofstra ID#: _____ Date of Birth: _____

School: _____

Department: _____ Rank: _____

Office Address: _____ Office Phone #: _____

Campus Email: _____ Personal Email: _____

Home Address: _____

Home Telephone #: _____ Cell Phone #: _____

NOTICE: As per Article 2.2 of the current Collective Bargaining Agreement (CBA) adjunct enrollment in Hofstra’s AAUP Chapter is mandatory when adjuncts teach a sufficient number of semester hours as defined in Article 2.2, becoming regular adjunct faculty members of the collective bargaining unit. Adjuncts are contractually obliged to pay their union dues. An exemption from the payment of dues is explained in the current CBA, Article 16.2 – Exemption by Right of Conscience, which states:

A member of the collective bargaining unit may request exemption by right of conscience from the payment of chapter dues and assessments by filing a written affidavit giving reasons for such objection to any participation in or support of collective bargaining activities on behalf of the Hofstra Chapter of the AAUP. Such affidavit shall be filed with the President of the University and the President of the AAUP and shall thereby exempt the collective bargaining unit member from the "Dues" provisions of this Agreement. Any such exempt person shall be required to contribute a sum equal to the dues to any campus use such as scholarships and library, but not to be used to modify salaries. These monies shall be distributed by the Administration.

Annual dues cover the period from January 1st through December 31st. As of January 1, 2016, the adjunct dues are \$96.00 for the year, regardless of the number of credits taught. **NOTE:** There is an additional \$20.00 processing fee for those adjuncts opting to pay by check.

TO BE ENTERED BY AAUP/PAYROLL OFFICE: Dues Amount: \$ _____ (Note that this amount may change from year to year if approved by the membership)

Please select your payment option:

Authorized Payroll Dues Deduction

TO: Hofstra University Payroll Office:

Consistent with the relevant provisions of the current Collective Bargaining Agreement (Article 16), I hereby authorize you to deduct my annual AAUP dues from my salary. This authorization shall remain in effect unless terminated by me upon written notice of withdrawal or by termination of my employment. Adjunct dues will be deducted in a lump sum during the first semester or session of the calendar year in which the adjunct faculty member teaches.

Signature: _____ **Date:** _____

Payment by Check (annual dues plus a \$20.00 processing fee)

Please make checks out to AAUP Hofstra University.

*** Completed Payroll Dues Authorization Forms will be kept on file in the AAUP Office.**

The information will remain in the strictest confidence in the AAUP Office and the Payroll Department.

While contributions or gifts to the Hofstra Chapter AAUP are not tax deductible as charitable contributions for Federal Income Tax purposes, they may be tax deductible under other provisions of the Internal Revenue Code.

Please return the completed form to Dr. Elena Cevallos of the AAUP in 137 Monroe Hall

Revised 7/14/2015