



MEMBERSHIP ENROLLMENT FORM

FOR NYSUT USE ONLY LOCAL CODE

NEW YORK STATE UNITED TEACHERS AMERICAN FEDERATION OF TEACHERS (AFT) (AFL-CIO) NATIONAL EDUCATION ASSOCIATION (NEA)

LOCAL NAME

Form with fields for SOCIAL SECURITY NUMBER, FIRST NAME, M.I., LAST NAME, ADDRESS, CITY, STATE, ZIP CODE, GENDER, DATE OF BIRTH, AREA CODE TELEPHONE, BUILDING CODE, DUES PAID BY, SALARY.

IMPORTANT: Please check one State and one National category.

STATE CATEGORY and NATIONAL CATEGORY selection boxes with codes and descriptions.

I hereby enroll as a member of the above named local organization, the New York State United Teachers and its national affiliate(s), The National Education Association and American Federation of Teachers, AFL-CIO as may be applicable.

EFFECTIVE MO./YR. and EMAIL ADDRESS fields.

ARE YOU A CURRENT NYSUT MEMBER? NO YES. IF YES, WHERE:

HIGHEST LEVEL OF EDUCATION COMPLETED: SOME HS (1), HS (2), 2 YR DEGREE (3), 4 YR DEGREE (4), MASTERS (5), DOCTORATE (6), OTHER (9)

PLEASE INDICATE THE BEST DESCRIPTION OF YOUR WORK ENVIRONMENT: ELEMENTARY (1), SECONDARY (2), HIGHER ED (3), HEALTH CARE (4), MUNICIPAL (5), MIDDLE SCHOOL (6), SPECIAL ED (7), ADULT ED (8), OTHER (9) PLEASE SPECIFY:

PLEASE CHECK THE BOX NEXT TO THE TITLE THAT BEST DESCRIBES YOUR POSITION - PLEASE LOOK AT ALL THE COLUMNS

Table with 4 columns: CERTIFIED/LIC. SCHOOL TITLES, SCHOOL RELATED, HIGHER EDUCATION, MEDICAL. Lists various job titles with checkboxes.

NEW YORK STATE UNITED TEACHERS, 800 TROY-SCHENECTADY ROAD, LATHAM, NEW YORK 12110-2455

New York State United Teachers (NYSUT) maintains dual affiliation with the American Federation of Teachers, AFL-CIO and the National Education Association where applicable.

Membership in NYSUT or any successor organization begins and eligibility for benefits is effective as of the month/year indicated on this signed enrollment form.

Membership dues include subscriptions to the publications of NYSUT, AFT and the NEA. NYSUT includes \$12.00 for a subscription to New York Teacher for one year.

SIGNATURE field

Please list any and all professional licenses and/or certificates you hold:

C. THIS COPY TO LOCAL