

# Metro Community College Educators Union

## Payroll Deduction Authorization

Name: \_\_\_\_\_ MCC Emp. ID#: \_\_\_\_\_

I hereby join the Metro Community College Educators Union (MCCEU) and authorize Metropolitan Community College to deduct from my post-tax earnings each pay period the amount of dues established by the MCCEU and certified to the College by the MCCEU President or designee. This authorization shall be ongoing and may be revoked only upon termination of my employment or by written notice to the College at least two (2) weeks prior to the first pay date upon which such revocation is to take effect. I authorize the amount deducted to be paid to the MCCEU Treasurer or designee. The effective date of this authorization will be certified to the College by the MCCEU President or designee.

I receive my salary over \_\_\_\_ 12 months \_\_\_\_ 9 months.

\_\_\_\_\_  
Date Educator Signature Union Officer/Rep Signature

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*(Additional Member Information - Please Complete in Full)*

Name: \_\_\_\_\_ Personal Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Campus/Center \_\_\_\_\_ Title: \_\_\_\_ *Faculty* \_\_\_\_ *Counselor* \_\_\_\_ *Advisor* \_\_\_\_ *Other* \_\_\_\_\_

*For Faculty, Academic Program Area:* \_\_\_\_\_

*Complete, sign and submit this form via email to [president@mcceu.org](mailto:president@mcceu.org); you may also submit a paper copy to any Union officer or representative*

If you are a current MCCEA/NSEA member, and no longer want to continue to pay NSEA dues, it is your responsibility to cancel your NSEA membership by sending an email to the following: [membership@nsea.org](mailto:membership@nsea.org)