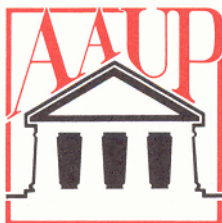


ACTIVE MEMBERSHIP FORM



AMERICAN ASSOCIATION OF UNIVERSITY PROFESSORS UC CHAPTER

Payroll Deduction. By my submission of this form, I hereby request and authorize the University of Cincinnati to deduct from my monthly salary in equal installments the annual amount of AAUP dues in accordance with Article 22 of the Collective Bargaining Agreement. AAUP dues are three-fourths of one percent (.75%) of base salary. I voluntarily authorize this deduction, which authorization is automatically renewed each September 1 hereafter unless I revoke it by written notice within the first 15 days of August to the AAUP - UC Chapter at 450 Dabney Hall.

Name _____

Dept./College _____

Office Location _____ Mail Location _____

Email Address _____

Office Phone _____ Alternate Phone _____

Tenure Status (for national AAUP records): Tenured Tenure-track Non-Tenured

Date _____