



AUTHORIZATION FOR  
DEDUCTION OF ASSOCIATION DUES  
AAUP-NMU CHAPTER

Name \_\_\_\_\_  
(type or print)

NMUIN: \_\_\_\_\_ Department \_\_\_\_\_

Each employee may submit a signed Association Dues Decision Form – (via the Association).

I authorize the collection of Association dues

By making this selection and signing below, the university is authorized to deduct from wages earned or to be earned by me, Association Dues as certified to the University by the Association's Treasurer; the university shall remit the same to the Association at such time and in such manner as may be agreed upon between the University and the Association.

Any such authorization shall remain in effect until revoked in writing (signed) by the employee.

I do not authorize the collection of Association dues

By making this selection and signing below, the University is either not authorized or is no longer authorized to deduct from wages earned or to be earned by me for Association Dues.

\_\_\_\_\_  
Signature of Faculty Member

\_\_\_\_\_  
Date of Signing

\_\_\_\_\_  
Date of Delivery to University