

Check-Off Authorization and Assignment

I, the undersigned hereby authorize my employer, Truman State University, to deduct from my wages and to pay to Local 773 or its authorized representative, initiation fees and membership dues, in such amounts as may be established by such Local Union and in accordance with the agreement between such Local Union and my employer. This authorization and assignment shall be irrevocable for the term of the applicable contract between the Union and the Company, or for one year, whichever is the lesser, and shall automatically renew itself for successive yearly or applicable contract periods thereafter, whichever is the lesser, unless I give written notice to the Company and the Union at least 30 days and not more than 60 days before any periodic renewal date of this authorization and assignment of my desire to revoke the same.

_____ Name (please print)	_____ Banner ID Number
Address: _____ Street	_____ City, ST Zip
_____ Date of Birth	_____ Date of Employment
<input type="checkbox"/> Participate <input type="checkbox"/> Terminate Reason for Change	_____ Effective Date of Change

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Submit to Human Resources

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Employee Copy