



AAUP-WSU Membership Form

I, the undersigned, wish to join the Wright State University Chapter of the AAUP as a regular chapter member with voting privileges, and I authorize membership dues* to be deducted from my paychecks accordingly.

Name (please print): _____

Signature: _____

UID number: _____

Department: _____

Date: _____

* Current Annual AAUP-WSU Dues for Bargaining Unit Faculty:



Please indicate your category with a checkmark in the appropriate box:

- 9 - month (academic year) contract — 0.700% of Annual Base Salary
- 12 - month (fiscal year) contract — 0.573% of Annual Base Salary

Excepting some faculty with administrative positions or appointments in matrix departments (School of Medicine — College of Science and Mathematics), almost all Bargaining Unit faculty have 9-month (academic year) contracts.

Please **Print, Sign, and Scan** the form as a .pdf, and send by e-mail to aaupwsu@gmail.com or mail signed copy to the Chapter Office, 113 Medical Sciences.

Thank you for your membership in AAUP-WSU!

May 4, 2022

Campus mail: AAUP-WSU
113 Medical Sciences Building

U.S. mail: AAUP-WSU
113 Medical Sciences Building
Wright State University
Dayton, Ohio 45435-0001

Chapter email: aaupwsu@gmail.com

Chapter website: aaup-wsu.org

Officers: Mr. Robert (Bobby) Rubin, President, 937-775-3136
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