APPLICATION FOR MEMBERSHIP



Local 195, I.F.P.T.E. 186 North Main Street Milltown, NJ 08850 732-247-0350 / www.local195.org

Chapter:___

Local 195 Office Use Only	
I.D. #	
P/R Card Sent	
Email entered	

	Veteran Status: Yes No		
Name:			
Address:			
City:		_State:	Zip:
Cell No	Home No	Wo	rk No
Department:	Title	e:	
Work Location:	Payroll No		
Email Address:		Male/F	emale:
I hereby apply for membership in Local matters of wages, benefits, grievances an subscribe to the Constitution of the Intern	id other conditions of employment	and pledge to abide by	the Bylaws of I.F.P.T.E., Local 195 and
Signature:		Date:	
19			11/2021

	1 - 1		LAST FIRST M.I.		
	++				
PAYROLL NUMBE	BER SOCIAL SECURITY NUMBER		SOCIAL SECURITY NUMBER PRINT EMPLOYEE		PRINT EMPLOYEE NAME
OTHER AMOUN	ORIZE THE STATE OF NEW JERS TS AS MAY BE AUTHORIZED BY EMPLOYEE ORGANIZATION DI	SEY TO MAKE AMENDMENT ESIGNATED B	FOR EMPLOYEE ORGANIZATION DEDUCTION E BI-WEEKLY DEDUCTIONS FROM MY BASE SALARY IN THE AMOUNT OF 1% (OR FOR SUCH NT TO THE DUES SCHEDULE OF THE ORGANIZATION) FOR DUES PAYABLE TO THE TREA- BELOW. I UNDERSTAND THAT THIS AUTHORIZATION SHALL REMAIN IN EFFECT UNLESS CURRENT NEGOTIATED CONTRACT.		
EMPLOYEE ORGANIZATION	NAME (INCL. CHAPTER AND/OR LOCAL) AND MAILING ADDRESS AS IT APPEARS ON THE DIV. OF BUDGET AND ACCOUNTING APPROVED LIST LOCAL 195 A.F.L C.I.O. INTERNATIONAL FEDERATION OF PROFESSIONAL and TECHNICAL ENGINEERS 186 North Main Street, Milltown, NJ 08850				
FOR PAYROLL CLERK USE ONLY JOB CLASSIF			SIFICATION TITLE		
1 025 1	025 DIWLERE		E SIGNATURE DATE		
	AMOUNT	PAYROLL CL	CLERK SIGNATURE DATE		



