



## Emeritus Membership Application

**Name:** \_\_\_\_\_  
(please print clearly)                      Last    First    M.I.

**Former Department:** \_\_\_\_\_ **Date of Hire:** \_\_\_\_\_

**PSU ID:** \_ \_ \_ - \_ \_ - \_ \_ **Home/Cell Phone:** \_\_\_\_\_

**Former Rank and Job Title:** \_\_\_\_\_ **Non-PSU Email:** \_\_\_\_\_

**PSU Email:** \_\_\_\_\_ @ pdx.edu

**Home Address:** \_\_\_\_\_ **Date of Departure from the AAUP Bargaining Unit:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_

### Emeritus Membership

**I retired from AAUP represented position, am no longer employed by Portland State University in any capacity and am not eligible for Associate membership in PSU-AAUP. I hereby request that the PSU-AAUP Executive Council approve my application for Emeritus Membership. I have attached documentation that shows that I am a current member of National AAUP.**

\_\_\_\_\_

Signature of Former Bargaining Unit Member

Date

Date Approved by Executive Council: \_\_\_\_\_

National AAUP Membership confirmed: \_\_\_\_\_

This form is to be used by for members of the PSU-AAUP bargaining unit who have either retired from service at Portland State University and do not have earnings from PSU. Members who have retired and continue to work in a position greater than .5 FTE in the AAUP bargaining unit remain regular members and should not use this form. Members who have retired and continue to work in a position less than .5 FTE are eligible for Associate membership and can request an Associate membership form from the AAUP representation office.

As per the PSU-AAUP Constitution, Emeritus membership in PSU-AAUP have no voting rights and shall pay no Chapter dues. Emeritus members are expected to pay dues directly to National AAUP.