



Oxnard Federation of Teachers and School Employees

Membership Update



Support your local Union Bargaining Team- Build Our Power

Please Print Clearly on all sections.

AFT LOCAL UNION NAME:

LOCAL NUMBER:

OXNARD FEDERATION OF TEACHERS AND SCHOOL EMPLOYEES 1273

LAST NAME:

FIRST NAME:

DATE OF BIRTH:

JOB TITLE:

WORK LOCATION:

ROOM # OR OFFICE:

NON-WORK EMAIL

CELL PHONE:

WORK PHONE:

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HOME ADDRESS

CITY

STATE

ZIP

I hereby request and voluntarily accept membership in The Local and I agree to abide by its Constitution and Bylaws. I authorize The Local to act as my exclusive representative in collective bargaining over wages, benefits, and other terms and conditions of employment with my employer.

SIGNATURE

DATE

AUTHORIZATION FOR DUES WITHOLDING FROM EARNINGS

I hereby request and voluntarily authorize my employer to deduct from my earnings and pay over to The Local the regular monthly dues uniformly applicable to members of The Local. This authorization will remain in effect and shall be irrevocable unless I revoke it by sending written notice to The Local during the period not less than 30 days and not more than 45 days before 1) the annual anniversary date of this agreement or 2) the date of termination of the applicable contract between the employer and The Local, whichever occurs sooner. This authorization shall be automatically renewed as an irrevocable check-off from year to year unless I revoke it in writing during the window period, irrespective of my membership in The Local.

Union dues may not be deductible for federal income tax purposes; however, under limited circumstances dues may qualify as a business expense.

SIGNATURE

DATE

For the sake of the students we serve, we must work together to achieve the highest employment standards in the region. We must recruit and retain the highest quality personnel at OUHSD to be the best! Please return this form to your Site Rep or OFTSE Negotiations Team: OFTSE 2775 N. Ventura Rd. suite 202 Oxnard, CA 93030 or OFTSE1273@gmail.com

In Unity there is Strength | United for a Better OUHSD!

CIRCLE YOUR TOP 3 PRIORITIES

PUT A * NEXT TO YOUR NUMBER 1 PRIORITY.

If a topic is not listed and you feel deserves more attention please write it in the "other" box and explain your justification. If you do not feel that a specific topic is important you can leave the spot blank, there is no need to write a \$0. Please list any articles or specific language that needs to be changed and justify your amendment.

Salaries	Health Benefits	Retention of employees
Pay scales	Career Advancement	Safety and Health
Staffing/Workload	Retirement	Educational Benefits
Seniority	Sick leave	FMLA Leave
Equal pay for equal work	Union Access to Facilities	Grievance Procedure
Work Calendar / work hours	Coaching, Extra Duty Assignments and Gainful Employment	Evaluation Cycle
Other:		

Please add comments to more fully explain your thoughts and recommendations on your top ranked issues above

(Please Print):

TAKING ACTION

In 2014 we were able to settle our contract because people took action, showed up and spoke at board meetings. Are you willing to do it again to get the best possible contract?

I will take direct action to get the best possible contract: ___ Yes ___ No

I will attend Board of Trustees meetings: ___ Yes ___ No

I will write letters to the Editor of my local newspapers: ___ Yes ___ No

I will talk to: ___ Parents ___ Students ___ Community Organizations ___ Elected Officials