UCT ACADEMICS UNION
MEMBERSHIP APPLICATION FORM

Please fill in the necessary details, and return the completed form to:

Organiser for the Academics Union
Room 4.17, 4th Floor level,
PD Hahn Building, Chemistry Mall Road
University of Cape Town

Title: _____ Staff No.: _____

Name: _____

Surname: _____

Department: _____

Post: Please tick ALL relevant boxes

❒ **Full-time** ❒ **GOB**[1] ❒ **Non-GOB** ❒ **Other**

❒ **Part-time** ❒ **GOB**[2] ❒ **Non-GOB** ❒ **Other**

Please specify
Funding source: _____

Work Physical Address: _____

_____

Telephone No.: _____

Email Address: _____

I hereby apply for membership of the UCT Academics' Union and authorise the University Human Resources Department to deduct from my salary the appropriate monthly subscription and any increase as may be decided upon by the Academics Union Executive or a General Meeting.

Membership fees for 2023 is 0.1% of your CoE

Signature: ……..……. Date: ……..…….

[1] GOB = General Operating Budget of the University, rather than another source of funding.
[2] GOB = General Operating Budget of the University, rather than another source of funding.