



**PUBLIC SERVICE UNION OF BELIZE
MEMBERSHIP APPLICATION & PAYSHEET DEDUCTION AUTHORIZATION**

Application to be a member of the Public Service Union is hereby made:

Section 1: Personal Information		
Surname: _____ First Name: _____ Middle Initials: _____		
Date of Birth ___/___/___ Age: ___ dd ___ mm ___ yy ___ Gender: ___ Male ___ Female	Marital Status ___ Single ___ Widowed ___ Married ___ Common Law Number of Dependents: ___	Nationality ___ Belizean ___ Other _____ Social Security No: _____
Section 2- Address Details		
Address: _____		
Home Phone: _____ Mobile: _____ Email: _____		
Section 3 - Employment Details		
Employer/Department: _____		Position: _____
PSU Branch: _____		Office Phone #: _____ Office Fax : _____

Union Dues for Employment Status:

- () P.E. Officer (payscale 1-8) -\$15.00
- () Open Vote Workers - \$15.00
- () Municipal Workers -\$15.00
- () Pensioners -\$10.00
- () Statutory Body Workers below \$12,000.00 PA - \$15.00
- () P.E Officer (Payscale 9 and above) -\$20.00]
- () Statutory Body Workers above \$12,000.00 PA - \$20.00
- () Contract Workers - \$20.00]

<u>UNION DUES BREAKDOWN</u>	
<u>\$15.00</u>	<u>\$20.00</u>
\$1 Death Fund	\$2 Death Fund
\$2 Education Fund	\$2 Education Fund
\$1 Strike Fund	\$2 Strike Fund
\$1 Housing Fund	\$2 Housing Fund
	\$2 Admin. Support

Accountant General:

Beginning with the month ending _____ and until further notice, I hereby authorize monthly deduction from my salary. The sum of \$15.00/\$20.00 representing union dues subscription, the sum so deducted, should be remitted to the Public Service Union of Belize, Hilltop, P.O. Box 458, Belmopan City.

Date: _____

Signature of Applicant: _____

Signature of Recruiting Officer: _____

Designation of Recruiting Officer: _____

Cc: Pay Clerk/Ministry/Department/Union Headquarters

NEW MEMBER: YES () NO () DUES INCREASE YES () NO ()