## Psychologist

### Membership Application Form



#### **AUSTRALIAN EDUCATION UNION - ACT BRANCH**



"It's important educators have a voice.
That's where the union comes in."



We're here to support each other. And united together, we make a difference.

#### **Australian Education Union ACT**

Visit: 40 Brisbane Ave, Barton ACT 2600

Post: PO Box 3042, Manuka 2603

Phone: (02) 6272 7900

Fax: (02) 6273 1828

Web: www.aeuact.org.au

Email: aeuact@aeuact.org.au

Facebook: facebook.com/aeuact

Twitter: twitter.com/aeuact



# What you get when you join

#### **Better pay**

You have experts at the bargaining table representing you when your pay is being negotiated. That's why in 2012 school psychologists received an \$8,000 boost in addition the standard pay rise. School psychologists were earning \$20,000 more in 2014 than they were in 2011.

#### **Better conditions**

You have access to paid maternity leave, permanent part-time work, improved school psychologist to student ratios and a union constantly campaigning to improve the conditions in your workplace.

#### Information, advice and support

Whenever you have questions about topics like salary, leave, entitlements, probation, contracts, transfer, workload and work safety you have a network of support at your school and full-time paid officers to assist you.

#### A voice for educators

Your representatives are constantly meeting with public servants and politicians to make sure they understand what it's like in the school. You also have a voice in the media making sure the community understands the challenges we face and the great work we do.

#### A voice for public education

You have a champion for public education in the community, promoting our schools and winning extra resources for them.

#### **Training**

You can access training on maternity leave, managing finances and superannuation, applying for jobs, preparing for leadership and other aspects of your professional life.

#### Journey Cover insurance

The employer does not provide journey cover. As an AEU member you're covered. If you are injured travelling to or from work or professional learning events, you are eligible for income protection under our policy.

#### **Union Shopper**

With the collective buying power of union members across Australia, you get great deals on electrical products, travel services, cars, computers, phones and more.

#### Teachers' Health Fund

You are eligible to join Teachers Health Fund, the national, not-for-profit health fund designed exclusively for education union members and their families.

#### You have a say

You're part of a democratic organisation in which you have a say. You choose who you feel best represents your interests in your workplace or you can become a representative yourself.

#### You're part of our community

You are part of a community of 3,500 educators in the ACT and nearly 200,000 educators across Australia. Meet people, share ideas and collaborate.

#### You know we've got your back

If you ever run into trouble, whether you're not being treated fairly at work or you find yourself in financial hardship, we stick by each other.

#### It's easy and affordable

You only pay .85% of your salary (+GST). That's only \$26 a fortnight for a beginning psychologist. In addition, your union fees are tax deductible!

## **Psychologist**

Are you in your first 3 years of employment?



## Membership Application Form Australian Education Union - Act Branch

#### Please complete this form send it to the AEU - ACT Branch Office Post: PO Box 3042, Manuka 2603 Fax: (02) 6273 1828 Email: aeuact@aeuact.org.au. 1) Personal Details Title: Surname: Surname: Preferred Name: DOB: / / Postal Address: Suburb: Postcode: Home Phone: Work Email: Personal email: ☐ Female Gender: □ Male ☐ Intersex Have you previously been a member of the AEU-ACT Branch? ☐ Yes ☐ No Were you asked by a colleague to join the AEU? ☐ Yes □ No If yes, please provide colleague's name The following questions are voluntary and are asked in order to help advocate on behalf of members. Do you have a disability? ☐ Yes Do you identify as LGBTIQ? ☐ Yes Do you identify as Aboriginal or Torres Strait Islander? ☐ Aboriginal ☐ Torres Strait Islander ☐ No Are you from a language background other than English? Yes $\square$ No If yes what is your primary language: 2) Employment Details Work Location (the location where you spend the most time): Gross Annual Salary: ☐ Full time contract **Employment Status:** ☐ Full time permanent □ Part time permanent % load: □ Part time contract % load: ☐ Primary: Preschool Sector/s: ☐ Primary: K-2 ☐ Primary: 3-6 ☐ Secondary: High School ☐ Secondary: College ☐ ACT School Office □ Other ☐ Specialist School **Position:** ☐ New School Psychologist ☐ Senior Psychologist ☐ Manager Psychologist ☐ Experienced School Psychologist 1 ☐ Experienced School Psychologist 2

☐ Yes

☐ No



#### 3) Membership Agreement

I hereby apply for membership of the ACT Branch of the Australian Education Union and if admitted agree to abide by the Rules of the Union. AEU Rules can be found at www.aeuact.org.au. I agree to pay to the AEU fees owing in accordance with the Union's schedule of subscriptions. I understand that my fees will be adjusted automatically in line with salary movements. I recognise that I must inform the Union of any other salary or status adjustments otherwise I will not be a fully financial member and may not be eligible for the full range of services. I understand that the Union's Rules require me to give written notice of resignation.

#### 4) Payment Options (Please choose 1 only)

#### Option 1: Fortnightly Payroll Deduction (permanent and contract staff only)

I authorise the AEU to contact ETD to commence fortnightly deductions at the appropriate rate as soon as possible. I authorise the AEU to access my salary and other employment details from the Education and Training Directorate for the purpose of updating AEU membership records.

AGS Number (found on payslip):		Signature:	Date:
Option 2: Monthly Direct Debit I authorise the AEU to commence a monthly direct debit from my nominated account at the appropriate rate to be debited on the 11th of each month using the bulk electronic clearing system (BECS).			
Name of Financial Institution:		BSB:	
Account Number:		Signature:	Date:
Option 3: Monthly Credit Card			
I authorise the AEU to commence monthly charges at the appropriate rate to be debited on the 11th of each month.			
Card type:	☐ MasterCard	□ Visa	
Card Name:			
Card Number:		CSC:	Expiry:
Signature:		Date:	

Thanks for joining our community of 3,500 ACT educators and nearly 200,000 educators nationwide! We'll be in touch soon to confirm your membership and tell you more about how you can access the benefits of being a member and take an active role in our union.



#### **Privacy Statement**

The Australian Education Union, Australian Capital Territory operates in accordance with the provisions of the Privacy Act 1998. We are committed to handling your personal information in a strictly confidential manner.

Our full privacy policy can be viewed at: www.aeuact.org.au/privacy policy