



Welcome!

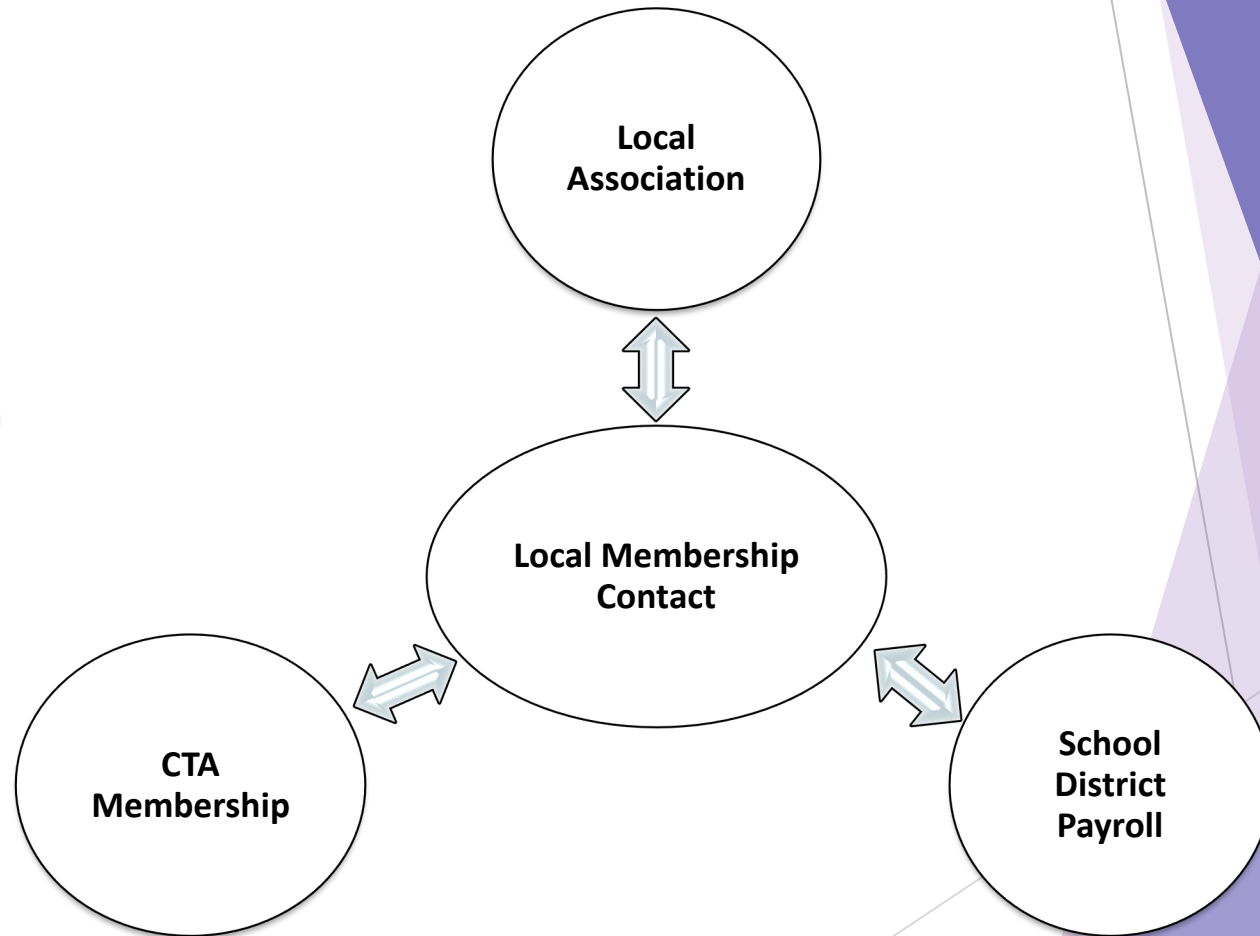
Objectives

- ❖ Role & Responsibilities
- ❖ Available Tools
- ❖ Member Engagement Resources
- ❖ Membership Processing
- ❖ Drop Process

Role & Responsibilities



What is a local membership contact?



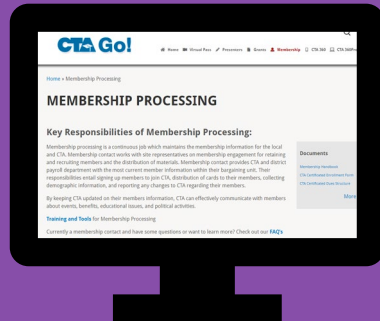
Available Tools



CTA PROVIDED MEMBERSHIP TOOLS

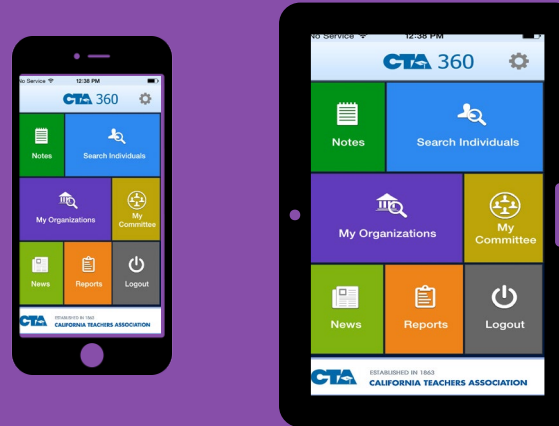
Membership Processing Resources Website

<https://www.cta.org/membership>



CTA 360 Mobile App Database

<https://www.cta.org/membership/cta360>



CTA 360Pro Desktop Database

<https://www.cta.org/membership/cta360pro>



Membership Engagement



Value of Membership

Your Advocate. Your Partner. Your CTA.

Thank you for choosing a career in education. While it's personally rewarding, it's also professionally demanding. That's why NEA, CTA and your local association will provide you the support you need to be great at what you do. Being a member connects you with other educators. Together, we've been the most powerful voice for students and public education in California since 1863. And together, we still are. *We do this by:*

- ✓ Negotiating fair salaries, health care and other benefits
- ✓ Leading student-centered educational improvements
- ✓ Supporting your professional practice with conferences, workshops, grants and scholarships
- ✓ Improving learning and working conditions
- ✓ Enhancing and defending your professional rights
- ✓ Providing cost-saving benefits designed just for educators

Membership Engagement

MEMBER BENEFITS

Member Benefits

- Educators Employment Liability (EEL)
- Group Legal Services (GLS)
- Disability/Life Insurance
- Travel Discounts

Resources

- CTA: CTAMemberBenefits.org
- NEA: neamb.com

Union Recruitment Rights



AB 119

- New hire information (Monthly)
- Full list of bargaining unit members (Every 4 Months)
- Access to new employee orientations

SB 866

- Locals communicate union participation directly to districts
- Members cannot drop membership at district office

Membership Processing

- ❖ Online Enrollment
- ❖ Revised Membership Form (22-23)
- ❖ Timeline
- ❖ Membership Cards & Update Roster
- ❖ Membership Types

ONLINE ENROLLMENT

MEMBERSHIP MATTERS

Join CTA

Because we can accomplish more together. Because CTA provides resources and training. Because through collective action we can bring about change for our students, ourselves, and each other.

The Power of Membership

Whether you're a veteran educator, preparing to retire, or fresh on the scene, we're all in it together, united in our commitment to strengthen public education for all students.

Since 1863, CTA has been fighting for educators and the students they serve. At the local level, members bargain for fair working and learning conditions, so they can ensure that school districts provide the schools all students deserve. CTA members join a long and vibrant legacy of fighting for equity by lifting up the voices of the unheard and winning resources for schools and students. CTA members individually and collectively are the best and most important advocates for public education and the professionals that make it possible.

The combined strength of CTA's 310,000 members and NEA's 3.2 million members makes us powerful and passionate advocates for you at the state and national levels. That means that just by joining CTA, you're helping an education support professional in another district bargain a living wage right now. And another educator, just by being a member, helped get you discounts through Member Benefits and CTA Access to Savings.

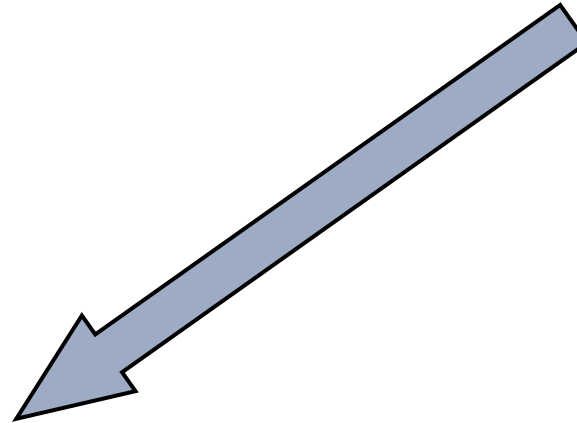
About Us

Our History

Membership Dues Info

Join Now

<https://www.cta.org/JOIN>



ONLINE ENROLLMENT

LET'S GET STARTED! CHOOSE YOUR MEMBERSHIP



CERTIFICATED TK-12 EDUCATORS

Includes TK-12 teachers, counselors, school librarians, nurses and any other non-administrative, certificated educator employed by a California public school district.



COMMUNITY COLLEGE INSTRUCTORS

Includes instructors and faculty members employed by a California public Community College District.

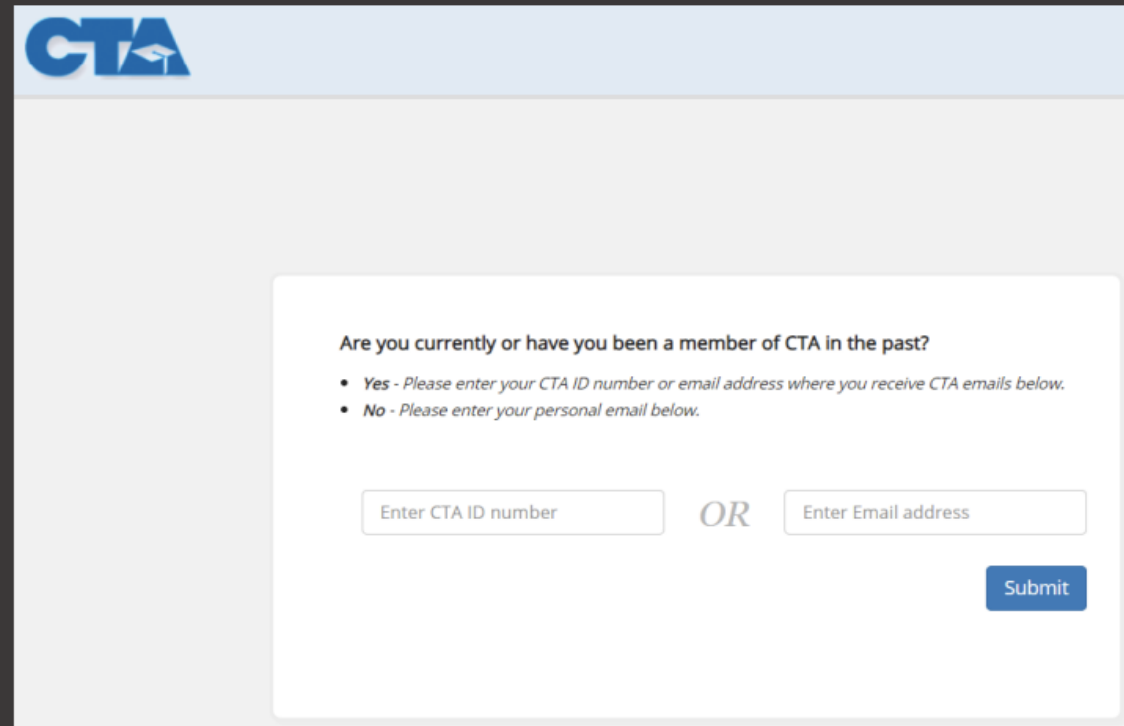


EDUCATION SUPPORT PROFESSIONALS

Includes paraprofessionals, office staff, bus drivers, maintenance workers, specialists, and other classified, non-certificated Education Support Professionals.

ONLINE ENROLLMENT

ONLINE ENROLLMENT INITIAL SEARCH



The screenshot shows the CTA logo at the top left. Below it, a white box contains the following text:

Are you currently or have you been a member of CTA in the past?


- *Yes - Please enter your CTA ID number or email address where you receive CTA emails below.*
- *No - Please enter your personal email below.*

Below the list are two input fields: "Enter CTA ID number" and "Enter Email address", separated by the word "OR". A blue "Submit" button is located to the right of the "Enter Email address" field.

Members are asked to enter an EMAIL or CTA ID. This will allow the system to verify their eligibility and to also search the Falcon Database for any existing individual profile.

ONLINE ENROLLMENT

3 PAGE FORM

HOME

Tell us who you are
The California Teachers Association strives to protect and promote the well-being of its members. As such, CTA must confirm the eligibility of each individual wishing to enroll as an active member. Please check all the applicable boxes below to determine your eligibility and to proceed with your online enrollment.


☐ I am employed in public education in California.
☐ I hold or shall be eligible to hold a baccalaureate or higher degree or the regular teaching, vocational, or technical certificates required by my employment.
☐ I am eligible for membership under the collective bargaining agreement between the local chapter and my employer.
☐ I acknowledge my enrollment is conditional upon verification of my employment with the indicated employer/school district.

CancelNext

Personal Information * Fields are required
First Name*Middle NameLast Name*Last 4 digits of your SSN

Contact Information
Home Address*Address Line 2
City*State*Zip Code*
California
Primary Phone*Phone Type*Home Email*
Cell
Confirm Email*

Additional Information
EthnicityGenderBirthdate
Please selectPlease select
Social Media Used: ☐ Instagram ☐ Pinterest ☐ Facebook ☐ Twitter

HOME

Tell me more, tell me more!
Prior Employer/School District Information (if applicable)


Current Employer/School District Information
Employer/District*Local Association*Work Location
Please SelectPlease SelectPlease Select

Membership Information
Member Type: Active MemberCTA Membership Category*
Please Select

CTA MEMBERSHIP CATEGORY DESCRIPTION	CTA MEMBERSHIP CATEGORY
If you are an educator who works FULL TIME or more than 60% of a full time assignment. This does NOT include pre-school, head start, child care, adult ed or substitute educators whose salary is less than the minimum K-12 educational salary.	Please select: CATEGORY 1
If you are an educator who works PART-TIME between 33 1/2% - 50% of a full time assignment.	Please select: CATEGORY 2A
If you are an educator who works PART-TIME between 51% - 60% of a full time assignment. This includes pre-school, head start, child care, adult ed or substitute educators whose salary is less than the minimum K-12 educational salary.	Please select: CATEGORY 2B
If you are an educator or substitute educator who works PART-TIME or 20% or less of a full time assignment.	Please select: CATEGORY 3A
If you are an educator who works PART-TIME between 25% - 33 1/3% of a full time assignment.	Please select: CATEGORY 3B
If you are an educator who works PART-TIME or HOURLY in Adult Ed or a Community College.	Please select: CATEGORY 4

CTA Voluntary Contribution
All CTA dues include a \$20 voluntary contribution per year to help fund CTA advocacy efforts and fund the CTA Foundation for Teaching and Learning, which provides scholarships to members and supports teacher-led efforts to improve public schools. To opt out of the voluntary contribution, complete the Voluntary Contribution Change Form. Forms are available at www.cta.org/contribution, from your local membership contact or via email at membership@cta.org.

CTA/ABC & Independent Expenditures Allocation (optional)
Designated portions of CTA dues are allocated to the Association for Better Citizenship (CTA/ABC) and to Independent Expenditures (IE) through which CTA provides financial support for education-related issues (CTA/ABC) and CTA endorsed bipartisan candidates for local and state offices (CTA/ABC and IE).
☐ Please indicate if you choose not to allocate a portion of your dues to the CTA/ABC and the IE account and want all your dues to remain in the general fund.

HOME

WAIT! One last step!

Confirmation
Name: Star SpangledMember Type: Active Member
Address: 1705 Murchison Dr Burlingame, CA 94010-4504Employer/District: ACALANES UNION HIGH (Lafayette)
Email: worldtravlr20@gmail.comLocal: ACALANES EDUC ASSN
Phone: (650) 555-0000CTA Category: Category 1

Membership, Dues Payment and Dues Deduction Authorization
CTA Terms and Conditions of Membership
YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in
☐ I agree with the terms and conditions*
Type full name (which constitutes a signature)*

CancelBackEnroll



Tell us who you are

The California Teachers Association strives to protect and promote the well-being of its members. As such, CTA must confirm the eligibility of each individual wishing to enroll as an active member. Please check all the applicable boxes below to determine your eligibility and to proceed with your online enrollment.

- ☐ I am employed in public education in California.
- ☐ I hold or shall be eligible to hold a baccalaureate or higher degree or the regular teaching, vocational, or technical certificates required by my employment.
- ☐ I am eligible for membership under the collective bargaining agreement between the local chapter and my employer.
- ☐ I acknowledge my enrollment is conditional upon verification of my employment with the indicated employer/school district.

[Cancel](#) [Next](#)

Personal Information

* Fields are required.

First Name*	Middle Name	Last Name*	Last 4 digits of your SSN
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact Information

Home Address*		Address Line 2	
<input type="text"/>		<input type="text"/>	
City*	State*	Zip Code*	
<input type="text"/>	<input type="text" value="California"/>	<input type="text"/>	
Primary Phone*	Phone Type*	Home Email*	
<input type="text"/>	<input type="text" value="Cell"/>	<input type="text"/>	
Confirm Email*			
<input type="text"/>			

Additional Information

Ethnicity	Gender	Birthdate
<input type="text" value="Please select"/>	<input type="text" value="Please select"/>	<input type="text"/>

Social Media Used : ☐ Instagram ☐ Pinterest ☐ Facebook ☐ Twitter



Tell me more, tell me more!

Prior Employer/School District Information (if applicable)

Current Employer/School District Information

Employer/District*

Please Select

Local Association*

Please Select

Work Location

Please Select

Membership Information

Member Type: Active Member

CTA Membership Category*

Please Select

CTA MEMBERSHIP CATEGORY DESCRIPTION	CTA MEMBERSHIP CATEGORY
If you are an educator who works FULL TIME or more than 60% of a full time assignment. This does NOT include pre-school, head start, child care, adult ed or substitute educators whose salary is less than the minimum K-12 educational salary.	Please select: CATEGORY 1
If you are an educator who works PART-TIME between 33 1/3% - 50% of a full time assignment.	Please select: CATEGORY 2A
If you are an educator who works PART-TIME between 51% - 60% of a full time assignment. This includes pre-school, head start, child care, adult ed or substitute educators whose salary is less than the minimum K-12 educational salary.	Please select: CATEGORY 2B
If you are an educator or substitute educator who works PART-TIME or 25% or less of a full time assignment.	Please select: CATEGORY 3A
If you are an educator who works PART-TIME between 25% - 33 1/3% of a full time assignment.	Please select: CATEGORY 3B
If you are an educator who works PART-TIME or HOURLY in Adult Ed or a Community College.	Please select: CATEGORY 4

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CTA/ABC & Independent Expenditures Allocation (optional)

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☐ Please indicate if you choose not to allocate a portion of your dues to the CTA/ABC and the IE account and want all your dues to remain in the general fund.



WAIT! One last step!

Confirmation

Name: Star Spangled

Address: 1705 Murchison Dr Burlingame, CA 94010-4504

Email: worldtravlr20@gmail.com

Phone: (650) 555-0000

Member Type: Active Member

Employer/District: ACALANES UNION HIGH (Lafayette)

Local: ACALANES EDUC ASSN

CTA Category: Category 1

Membership, Dues Payment and Dues Deduction Authorization

CTA Terms and Conditions of Membership

YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in

☐ I agree with the terms and conditions*

Type full name
(which constitutes a signature)*


Cancel

Back

Enroll

ONLINE ENROLLMENT

- ❑ Online Enrollment Confirmation
- ❑ Welcome to CTA e-mail within 24 hours

 CALIFORNIA
TEACHERS
ASSOCIATION

JULY 14, 2020

Welcome to CTA!

New Member Information

Welcome to CTA! As an Active Member of the California Teachers Association, the National Education Association, and your local chapter, you are now part of one of the strongest advocates for educators in the country.

As a CTA member, you have at your fingertips access to a variety of benefits and programs to enhance your life and your career. To learn about the benefits for members, click [here](#).

Below you will find a temporary membership card to make use of the many member benefits available to you. Your physical membership card will be delivered to you shortly.


Please contact your Local Association if you have any questions or concerns regarding your CTA/NEA Membership. The contact information for **STAFF TCHRS ASSN** is


Local President	MINNIE MOUSE
Membership Contact	DONALD DUCK
Local Address	1705 MURCHISON DRIVE BURLINGAME CA 94010 (650) 555-1111
Local Phone	

We'd also like to provide you a digital copy of [your membership enrollment form](#), which you recently completed electronically. Simply click on the link above to view and print your form.

Click [here](#) for your copy of the Terms & Conditions for your CTA/NEA Membership. Please retain this email along with the accompanying hyperlink attachments for your records.

We are excited that you are committed in joining us as we continue to work together to improve the conditions of teaching and learning in California.

 CALIFORNIA TEACHERS ASSOCIATION
NATIONAL EDUCATION ASSOCIATION
2019-2021 OPERATIONS



AJ RJ
STAFF TCHRS ASSN
ID: 0010449517

TEMPORARY MEMBERSHIP CARD

ONLINE ENROLLMENT

Monday E-mails



Dear Chapter Leader,

The members listed below have been added in your local. These new members enrolled in the last week online or via CTA 360 and we need your help to let your district office know about these new memberships.

Your next steps:

1. **Choose one of these options to share this with your district payroll office ASAP!**
 - a. Forward this email to your district payroll contact with a message indicating to immediately add the members below to the payroll deduction register, or
 - b. Print and hand deliver this email (*Just like with a traditional paper enrollment form*) to the payroll office and ensure they add the individuals to the payroll deduction register
2. **Confirm with district payroll that membership dues are deducted immediately from the new members' pay warrants.**

Remember, as a result of SB 866, passed in 2018, you may simply provide the district with a list of new members to begin payroll deductions.

New Members to be Added to Payroll Deduction Register

Local Name	Individual ID	Last Name	First Name	Start Date	Category
------------	---------------	-----------	------------	------------	----------

Membership Form Overview

CTA CALIFORNIA TEACHERS ASSOCIATION nea NATIONAL EDUCATION ASSOCIATION YEAR 20__ - 20__ MEMBERSHIP ENROLLMENT FORM CERTIFICATED

Your Advocate. Your Partner. Your CTA.

Thank you for choosing a career in education. While it's personally rewarding, it's also professionally demanding. That's why NEA, CTA and your local association will provide you the support you need to be great at what you do. Being a member connects you with other educators. Together, we've been the most powerful voice for students and public education in California since 1863. And together, we still are. **We do this by:**

- ☒ Negotiating fair salaries, health care and other benefits
- ☒ Leading student-centered educational improvements
- ☒ Supporting your professional practice with conferences, workshops, grants and scholarships
- ☒ Improving learning and working conditions
- ☒ Enhancing and defending your professional rights
- ☒ Providing cost-saving benefits designed just for educators

PERSONAL INFORMATION

CTA Membership ID or Previous Employer/School District _____

First Name _____ MI _____

Last Name _____

Last 4 of SSN _____

Home Address _____

_____ Apt _____

City _____

State _____ Zip _____

Land Line _____

Cell Phone* _____

* See next page for information

Home Email _____

CTA/ABC & INDEPENDENT EXPENDITURES ALLOCATION (Optional)

Designated portions of CTA dues are allocated to the Association for Better Citizenship (CTA/ABC) and to Independent Expenditures (IE) through which CTA provides financial support for education-related issues (CTA/ABC) and CTA-endorsed bipartisan candidates for local and state offices (CTA/ABC and IE).

- ☐ Please indicate if you choose not to allocate a portion of your dues to the CTA/ABC and the IE account and want all your dues to remain in the general fund.

MEMBERSHIP INFORMATION

Local Association _____

Current Employer/ School District _____

Hire Date _____ Primary Employer? Yes No

If no, list employer _____

Job Title _____

Building/Work Site _____

TEACHING ASSIGNMENT INFORMATION AND DUES CATEGORY

- ☐ Category 1 61% - 100% ☐ Category 3A 25% or less ☐ Associate
- ☐ Category 2A 33 1/3% - 50% ☐ Category 3B 26% - 33 1/3%
- ☐ Category 2B 51% - 60% ☐ Category 4 Adult Ed Hourly

FOR OFFICE USE ONLY
ANNUAL DUES AMOUNTS
NEA: _____
CTA: _____
LEA: _____
NEA/FUND: _____
TOTAL: _____

NEA FUND DEDUCTION AUTHORIZATION (Optional)

I agree to contribute \$_____ annually to the NEA Fund. The NEA Fund for Children and Public Education (NEA Fund) collects voluntary contributions from Association members and uses these contributions for political purposes, including, but not limited to, making contributions to and expenditures on behalf of friends of public education who are candidates for federal office. ** See reverse for more information.

CTA VOLUNTARY CONTRIBUTION

All CTA dues include a \$20 voluntary contribution per year to help fund CTA advocacy efforts and fund the CTA Foundation for Teaching and Learning, which provides scholarships to members and supports teacher-led efforts to improve public schools. To opt out of the voluntary contribution, complete a Voluntary Contribution Change Form. Forms are available at www.cta.org/contribution, from your local membership contact or via email at memberships@cta.org.

MEMBERSHIP, DUES PAYMENT AND DUES DEDUCTION AUTHORIZATION

YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in collective bargaining over wages, hours, and other terms and conditions of employment.

I hereby (1) agree to pay annual dues uniformly required for membership in the Local, CTA, and NEA; and (2) request and authorize my Employer to deduct from my pay in each pay period, and transmit to CTA or its designated agent, a pro rata portion of the annual dues required for membership in the Local, CTA, and NEA, unless I pay dues by check. I fully understand that the dues required for membership in the three associations are subject to periodic change by the associations' governing bodies and authorize dues payment on a continuing basis, and regardless of my membership status, unless my obligation to do so ends under one of the circumstances below. This agreement to pay dues continues from year to year, regardless of my membership status, unless: I revoke it by sending written notice via U.S. mail to CTA Member Services, P.O. Box 4178, Burlingame, CA 94011, not less than thirty (30) days and not more than sixty (60) days before the annual anniversary date of this agreement; my employment with the Employer ends; or as otherwise required by law.

I understand that this agreement is voluntary and is not a condition of employment and that I have the legal right not to sign this agreement.

Member Signature _____ Date _____

CTA MEMBERSHIP DEPARTMENT COPY

Continue on the back side →

DEMOGRAPHIC INFORMATION (Optional)

Ethnicity ☐ African American
☐ American Indian/
Alaska Native
☐ Asian
☐ Caucasian

☐ Hispanic
☐ Multi-Ethnic
☐ Native Hawaiian/
Pacific Islander
☐ Other
☐ Unknown

Gender ☐ Female
☐ Male
☐ Non-Binary

Birthdate _____ (mm/dd/yyyy)

Social Media Used:
☐ Instagram ☐ Pinterest
☐ Facebook ☐ Twitter

HOW CAN WE BEST SUPPORT YOU? (Optional)

- What year did you enter the profession? _____
- I am:
 - ☐ Already a member
 - ☐ Transferring from another district
 - ☐ Joining the Association today
 - ☐ Interested in receiving more information about membership
- Your association provides supports and tools to ensure your success with students. What tools/trainings would you like to hear more about?
 - ☐ Classroom management (e.g. student behavior, relationships with students)
 - ☐ Lesson planning
 - ☐ Working with mentors and coaches
 - ☐ Working with families
 - ☐ Collaborating with administrators and colleagues
 - ☐ Unpacking professional expectations (e.g. evaluations, observations)
- Your association works to ensure that schools provide students with opportunities to be successful. Which of the following issues are most important to you?
 - ☐ Social and racial justice
 - ☐ Meeting the needs of students in poverty
 - ☐ Family and community engagement
 - ☐ Fully funded schools
 - ☐ Education policy - Contributing to critical decisions affecting my students, school, and district
 - ☐ Political advocacy - Supporting education policies to ensure all students have opportunities to succeed
- Your association advocates for conditions that retain high-quality educators for every student. Which of these are you interested in learning about?
 - ☐ Salary
 - ☐ Educator Rights & Responsibilities
 - ☐ Health Care Benefits
 - ☐ Pensions and Retirement Security
 - ☐ Student Debt and/or Finances
 - ☐ Stretching Your Paycheck
 - ☐ Working Conditions

MORE INFORMATION

*By providing my phone number, I understand that the NEA and its affiliates including CTA, the Local, NEA Member Benefits, and NEA360 may use automated calling technologies and/or text message me on my cellular phone on a periodic basis. NEA and its affiliates will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP in response to an NEA, CTA or Local text message to stop receiving the association's messages.

**Only U.S. citizens or lawful permanent residents may contribute to the NEA Fund. Contributions to the NEA Fund are voluntary; making a contribution is neither a condition of employment nor membership in the Association, and members have the right to refuse to contribute without suffering any reprisal. Although the NEA Fund requests an annual contribution of \$50, this is only a suggestion. A member may contribute more or less than the suggested amount, or may contribute nothing at all, without it affecting his or her membership status, rights or benefits in NEA or any of its affiliates. Contributions to the NEA Fund are not deductible as charitable contributions for federal income tax purposes. Federal law requires political committees to report the name, mailing address, occupation, and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year.

Membership Enrollment Form Revised 05/2019



CALIFORNIA TEACHERS ASSOCIATION

Welcome to CTA!

We are so happy to welcome you to your local chapter, the California Teachers Association, and the National Education Association. Whether you are new to the profession, new to the district, or just new to CTA, we want you to know that we are here to support you and empower you to be the best educator and advocate you can be. While education is a calling, it's also a vital job and a rewarding career, and when we all work together in union, we build a stronger profession.

It's our union and our voice that ensures every student in California gets the public education they deserve, regardless of ZIP code. That's why CTA supports and advocates for the educators who are nurturing tomorrow's inventors, thinkers, artists and leaders.

With CTA, you'll never be on your own. There's always a fellow member not far away who is willing to give a helping hand, some sage advice, or a shoulder when you need it.

Be sure to visit our websites regularly to learn about happenings locally and statewide, and check your home email for important messages and involvement opportunities. Visit www.CTA.org to learn about statewide activities and resources available to members. www.CTAGo.org has information about professional development opportunities and incentive grants for members to attend CTA conferences. Lastly, visit www.CTAMemberBenefits.org to take advantage of all the discounts and benefits available exclusively to you as a member of the California Teachers Association.

Again, welcome to CTA. We are so glad you joined.

1705 MURCHISON DRIVE, BURLINGAME, CA 94010 • P.O. BOX 921, BURLINGAME, CA 94011-0921
650.697.1400 • WWW.CTA.ORG

nea

MORE INFORMATION

*By providing my phone number, I understand that the NEA and its affiliates including CTA, the Local, NEA Member Benefits, and NEA360 may use automated calling technologies and/or text message me on my cellular phone on a periodic basis. NEA and its affiliates will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP in response to an NEA, CTA or Local text message to stop receiving the association's messages.

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Membership Form Overview

CTA CALIFORNIA TEACHERS ASSOCIATION **nea** NATIONAL EDUCATION ASSOCIATION

YEAR 20__ - 20__

MEMBERSHIP ENROLLMENT FORM CERTIFICATED

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PERSONAL INFORMATION

CTA Membership ID or Previous Employer/School District _____

First Name _____ MI _____

Last Name _____

Last 4 of SSN _____

Home Address _____ Apt _____

City _____

State _____ Zip _____

Land Line _____

Cell Phone* _____

* See next page for information

Home Email _____

MEMBERSHIP INFORMATION

Local Association _____

Current Employer/ School District _____

Hire Date _____ Primary Employer? Yes No

If no, list employer _____

Job Title _____

Building/Work Site _____

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☐ Category 1 61% - 100% ☐ Category 3A 20% or less ☐ Associate

☐ Category 2A 33 1/3% - 50% ☐ Category 3B 26% - 33 1/3%

☐ Category 2B 51% - 60% ☐ Category 4 Adult Ed Hourly

FOR OFFICE USE ONLY ANNUAL DUES AMOUNTS

NEA: _____

CTA: _____

IEA: _____

NEA FUND: _____

TOTAL \$: _____

NEA FUND DEDUCTION AUTHORIZATION (Optional)

I agree to contribute \$ _____ annually to the NEA Fund. The NEA Fund for Children and Public Education (NEA Fund) collects contributions from Association members and uses these contributions for political purposes, including, but not limited to, making expenditures on behalf of friends of public education and for federal office. ** See reverse for more information.

CTA/ABC & INDEPENDENT EXPENDITURES ALLOCATION (Optional)

Designated portions of CTA dues are allocated to the Association for Better Citizenship (CTA/ABC) and to Independent Expenditures (IE) through which CTA provides financial support for education-related issues (CTA/ABC) and CTA-endorsed bipartisan candidates for local and state offices (CTA/ABC and IE).

☐ Please indicate if you choose not to allocate a portion of your dues to the CTA/ABC and the IE account and want all your dues to remain in the general fund.

CTA VOLUNTARY CONTRIBUTION

All CTA dues include a \$30 voluntary contribution to help fund CTA advocacy efforts and fund the National Center for Teaching and Learning, which provides scholarship support for members and supports teacher-led efforts to improve education. If you wish to opt out of the voluntary contribution, complete a Voluntary Contribution Change Form. Forms are available at www.cta.org or from your local membership contact or via email at membership@cta.org.

MEMBERSHIP, DUES PAYMENT AND DUES DEDUCTION AUTHORIZATION

YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in collective bargaining over wages, hours, and other terms and conditions of employment.

I hereby (1) agree to pay annual dues uniformly required for membership in the Local, CTA, and NEA; and (2) request and authorize my Employer to deduct from my pay in each pay period, and transmit to CTA or its designated agent, a pro rata portion of the annual dues required for membership in the Local, CTA, and NEA, unless I pay dues by check. I fully understand that the dues required for membership in the three associations are subject to periodic change by the associations' governing bodies and authorize dues payment on a continuing basis, and regardless of my membership status, unless my obligation to do so ends under one of the circumstances below. This agreement to pay dues continues from year to year, regardless of my membership status, unless: I revoke it by sending written notice via U.S. mail to CTA Member Services, P.O. Box 4178, Burlingame, CA 94011, not less than thirty (30) days and not more than sixty (60) days before the annual anniversary date of this agreement; my employment with the Employer ends; or as otherwise required by law.

I understand that this agreement is voluntary and is not a condition of employment and that I have the legal right not to sign this agreement.

Member Signature _____ Date _____

CTA MEMBERSHIP DEPARTMENT COPY *Continue on the back side* →

MEMBERSHIP, DUES PAYMENT AND DUES DEDUCTION AUTHORIZATION

YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in collective bargaining over wages, hours, and other terms and conditions of employment.

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I understand that this agreement is voluntary and is not a condition of employment and that I have the legal right not to sign this agreement.

Member Signature

Date

Important: Membership forms are only valid with member signature and date

Membership Form Guide

How to Complete the Member Enrollment Form

This How-To Sheet is intended for Chapter Leaders that are assisting new members to complete the enrollment form. Be sure to only use this form, do not use any other enrollment form.

Personal Information:

- Enter the member name and contact information.
- Ensure to include both the land line & cell number.
- Home email is very important to be able to communicate with the member.
- If moving from another district, include the CTA Membership ID and/or the Previous Employer/School District to help link any previous records with any updated information.

Membership Information:

- Include the full name of the local, employer and hire date.
- Include the name of the primary employer.
- Include the full school name.

CTA/ABC Allocation:

Allows the member to decide to opt out of allocating a portion of dues to support pro education candidates and issues.

Teaching Assignment:

Select the percentage of time worked, see reverse for more info on categories. Note the explanation of the voluntary dues amount.

Membership, Dues Payment and Dues Deduction:

Outlines the terms of membership and identifies the local as the exclusive representative of the member for collective bargaining and employment conditions. Dues for the local, state and national associations will be deducted each pay period during the year. The member may revoke membership by notifying the local chapter president in writing and may cancel dues payments during a window between 30-60 days before their anniversary date of enrollment by notifying CTA via mail. **Important: Member must sign and date the form.**

NEA Fund Deduction:

Members have an opportunity to contribute to the NEA Fund supporting federal candidates that are pro-education. The total contribution will be deducted on a pro-rata basis over the school year.

COMPLETE THE BACK OF THE ENROLLMENT FORM

Demographics:

Optional information to help CTA better serve members.

4 Part Forms:

- Top sheet = Return to CTA Member Services in Burlingame as soon as complete.
- Page 2 = District Copy
- Page 3 = Local Copy
- Page 4 = Member Copy

CTA Survey:

This brief survey helps to identify the areas of interests of the new member. CTA has many programs and benefits for members and by completing this section, the local and CTA can better meet the needs of members.

Four easy ways to return forms to CTA:

- Fax forms to CTA at 650-552-5061
- Mail forms to CTA, PO Box 4178, Burlingame, CA 94011
- Email forms to Membership@CTA.org
- Drop off forms at your local CTA Office

More Information:

More details about how a member may be contacted via text messaging. Also, details regarding the contribution to the NEA Fund.

ACTIVE MEMBERSHIP CATEGORIES – TEACHING ASSIGNMENT

Those eligible for membership in more than one school district shall be enrolled in their primary place of employment.

MEMBERSHIP TYPE	MEMBERSHIP CATEGORY	% OF TIME WORKED	DESCRIPTION
ACTIVE FULL TIME	CATEGORY 1	61% - 100%	- Faculty assignment is more than 60% of a normal assignment. - Not including pre-school, head start, child care, adult ed or substitutes whose salary is less than the minimum teacher salary at that district.
ACTIVE PART-TIME	CATEGORY 2A	33 1/3% - 50%	- Faculty assignment is more than 1/3 but not more than 50% of a normal assignment.
ACTIVE PART-TIME	CATEGORY 2B	51% - 60%	- Faculty assignment is more than 50% but not more than 60% of a normal assignment.
ACTIVE PART-TIME	CATEGORY 3A	25% or less	- Faculty employed at a pre-school, head start, child care, adult ed or substitutes whose salary is less than the minimum teacher salary at that district.
ACTIVE PART-TIME	CATEGORY 3B	26% - 33 1/3%	- Faculty assignments 25% or less than a normal assignment. - Substitute assignments 25% or less than a normal assignment. - Faculty on unpaid leave.
ACTIVE PART-TIME	CATEGORY 4	Part-time/Hourly	- Faculty assignment is more than 25% but not more than 1/3 of a normal assignment. - Faculty employed in private higher educational institutions or the University of California for whom no representation by the Association in employer-employee relations exists or is immediately contemplated.
ACTIVE FULL TIME	ASSOCIATE	ASSOCIATE	- Employed part-time or hourly in adult education or community college. - Any person interested in advancing the cause of public education but not eligible for any other class of membership - Administrative and supervisory personnel are eligible

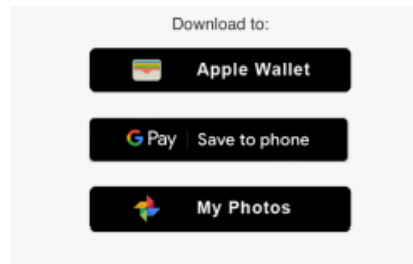
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- ☒ Email forms to Membership@CTA.org
- ☒ Drop off forms at your local CTA Office

Be sure to highlight the welcome letter on the back of the member copy.

Visit www.CTAGo.org/Membership for more resources, FAQ's and training regarding membership enrollment and processing.

Membership Cards - Digital



Membership Cards – printed copy

FIRST NAME		INITIAL	LAST NAME
STREET		CITY	ZIP
HOME E-MAIL			
OTHER E-MAIL			
HOME PHONE	CELL PHONE	SCHOOL / CAMPUS	LOCAL



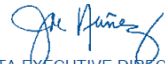
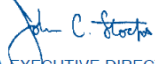
(650) 555-1234
marysmith@mail.com

HAPPY MOUNTAIN TA 9009
Ind: 0000123456

Mary G Smith
555 HAPPY DRIVE,
CITY, CA 94000

MOUNTAIN HIGH
HAPPY MOUNTAIN UNIFIED

IMPORTANT: If any of the information shown requires correction, enter the new information in the area to the left. Detach and return the postcard to your membership contact for forwarding.

	CALIFORNIA TEACHERS ASSOCIATION NATIONAL EDUCATION ASSOCIATION <small>NON-PROFIT ORGANIZATIONS</small>	 <small>Great Public Schools for Every Student</small>
		ID: 0000123456
Mary G Smith HAPPY MOUNTAIN T A		
Active Professional	Active 20XX-20XX	rofessional
 <small>CTA EXECUTIVE DIRECTOR</small>		 <small>NEA EXECUTIVE DIRECTOR</small>

Membership Timeline

Item	Sent by CTA	Due to CTA
Membership Materials Packet	July	
New Year Membership Roster	July	September
Membership Roster*	November	January
Membership Roster	March	May
New year local dues & leadership updates	May	June

***November membership roster affects NEA RA delegate count**

Ongoing: Submit enrollment forms to CTA Membership Dept and District as soon as possible for timely processing

Membership Roster

SAMPLE TCHRS ASSN—1234
SAMPLE UNIFIED

CTA MEMBERSHIP ROSTER 20XX—20XX

Page 1 of 10
Run By: STAFF
Run Date: XX/XX/20XX

MEMBER NAME CONTACT ID SSN4 WORK LOCATION	ADDRESS CITY STATE ZIP TELEPHONE EMAIL	PRINT ALL UPDATES/NOTES IN THIS AREA	STATUS DED ENROLL DATE	NEA CAT CTA CAT LEA CAT CCA CAT	NEA DUES CTA DUES LEA DUES CCA DUES	ABC OPT OUT AND/OR VOL CONT	DUES TOTAL AMT/PR DED
ABBOT, ABIGAIL ①	123 TESTING AVE ④		ACTIVE 10	61% - 100% ⑦	\$\$\$.\$\$ ⑧		⑨\$\$\$.\$\$
0001235487 ②	TEST CITY, CA 94066		09/01/2013	61% - 100%	\$\$\$.\$\$		\$\$\$.\$\$
4765	(555)555-1234 ⑤			61% - 100%	\$\$\$.\$\$		
TEST ELEMENTARY ③	TEST@XXXX.COM ⑥						

THE NUMBERS BELOW CORRESPOND WITH THE NUMBERS ON THE SAMPLE ABOVE.

1. Member Name.
2. Contact ID - Member's computer-unique identification number. **DO NOT** mark over this number at any time.
3. Work Location.
4. Member's home address, City, State and Zip.
5. Telephone number.
6. Member's primary email.
7. Category.
8. Dues amounts.
9. Total dues and Monthly payroll deduction amount.

STATUS DED ENROLL DATE	NEA CAT CTA CAT LEA CAT CCA CAT
ACTIVE 10 09/01/2013	61% - 100% ⑦ 61% - 100% 61% - 100%

General Membership Categories

Membership Status	Membership Category	Description	Dues Deductions
Active	1, 2A, 2B, 3A, 3B, and 4 (Percentage of FTE)	General Active Membership	Yes
Non-Member	1, 2A, 2B, 3A, 3B, and 4 (Percentage of FTE)	Commitment date on file and submitted a valid drop membership request outside of drop window	Yes
Non-Member	Dropped	Does not have a Commitment Date OR Commitment date on file and submitted a valid drop request within valid drop window	No
Non-Member	Potential	Newly employed by district	No
Non-Member	No Deductions	Leave of absence or unknown status with district	No
Non-Member	Former Fee Payer	Former agency fee payer standing prior to Janus verdict	No

Alternative Memberships

	MISCELLANEOUS	ASSOCIATE	RETIRED	STUDENT
Who qualifies?	Previous members with qualifying reason for continuing membership while on LOA	Anyone ineligible for other levels of membership	Previous members who are retiring or have retired	Anyone enrolled in an accredited California college or university
More Information	CTA Membership Dept	CTA Membership Dept	CTA.org/retired	CTA.org/scta

Membership includes:

- ✓ Limited CTA Group Legal Services
- ✓ CTA Death & Dismemberment Plan
- ✓ Eligibility or uninterrupted coverage for various CTA insurance programs



Drop Process

- ❖ Maintenance of Dues
- ❖ Commit Date
- ❖ Drop Process Procedures

Maintenance of Dues

What is the maintenance of dues

A member's acknowledgement and signed commitment to pay dues as outlined in the terms and conditions

MEMBERSHIP, DUES PAYMENT AND DUES DEDUCTION AUTHORIZATION

YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in collective bargaining over wages, hours, and other terms and conditions of employment.

I hereby (1) agree to pay annual dues uniformly required for membership in the Local, CTA, and NEA; and (2) request and authorize my Employer to deduct from my pay in each pay period, and transmit to CTA or its designated agent, a pro rata portion of the annual dues required for membership in the Local, CTA, and NEA, unless I pay dues by check. I fully understand that the dues required for membership in the three associations are subject to periodic change by the associations' governing bodies and authorize dues payment on a continuing basis, and regardless of my membership status, unless my obligation to do so ends under one of the circumstances below. This agreement to pay dues continues from year to year, regardless of my membership status, unless: I revoke it by sending written notice via U.S. mail to CTA Member Services, P.O. Box 4178, Burlingame, CA 94011, not less than thirty (30) days and not more than sixty (60) days before the annual anniversary date of this agreement; my employment with the Employer ends; or as otherwise required by law.

I understand that this agreement is voluntary and is not a condition of employment and that I have the legal right not to sign this agreement.

Member Signature _____ Date _____

Commit Date

The date the member acknowledged and signed the
terms & conditions of membership

MEMBERSHIP, DUES PAYMENT AND DUES DEDUCTION AUTHORIZATION

YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in collective bargaining over wages, hours, and other terms and conditions of employment.

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I understand that this agreement is voluntary and is not a condition of employment and that I have the legal right not to sign this agreement.

Member Signature _____ Date _____



Commit Date

Importance of Commit Dates

With a commit date:

- Membership can be dropped at any time
- Dues remain deducted unless valid revocation letter is submitted
- Revocation letters are considered valid only if submitted during valid revocation window period

Without a commit date:

- Membership can be dropped at any time
- Dues can be revoked at any time

Dues Revocation Window Period


60 days prior to the
anniversary of member's
commit date -

30 days to request drop

Ex, Signature Date: 9/1/2022

Drop Window: 7/3-8/2/2023

New Membership Form



**CALIFORNIA
TEACHERS
ASSOCIATION**

**nea
NATIONAL
EDUCATION
ASSOCIATION**

MEMBERSHIP ENROLLMENT FORM

CERTIFICATE

YEAR 20

2025

Your Advocate. Your Partner. Your CTA.

Thank you for choosing a career in education. While it's personally rewarding, it's also professionally demanding. That's why NEA, CTA and your local association will provide you the support you need to be great at what you do. Being a member connects you with other educators. Together, we're the most powerful voice for students and public education in California since 1863. And together, we still are. *We do this by:*

☐ Negotiating fair salaries, health care and other benefits

☐ Leading student-centered educational improvements

☐ Supporting your professional practice with conferences, workshops, grants and scholarships

☐ Improving learning and working conditions

☐ Enhancing and defending your professional rights

☐ Providing cost-saving benefits designed just for educators

PERSONAL INFORMATION

CTA Membership ID or Previous Employer/School District

First Name MI

Last Name

Last of SSN

Home Address

City Apt

State Zip

Land Line

Cell Phone*
**See next page for information*

Home Email

CTA/BC & INDEPENDENT EXPENDITURES ALLOCATION (Optional)

Designated portions of CTA dues are allocated to the Association for Better Education (CTA/ABC) and to Independent Expenditures (IE) through which CTA provides financial support for education-related issues (CTA/ABC) and CTA-member bipartisan caucuses for local and state affairs (CTA/ABC and IE).

☐ Please indicate if you choose not to allocate a portion of your dues to the CTA/ABC and the IE account and want all your dues to remain in the general fund.

MEMBERSHIP INFORMATION

Local Association

Current Employer/

School District

Hire Date

If no, list employer

Primary Employer? Yes No

Job Title

Bidding/ Working Site

TEACHING ASSIGNMENT INFORMATION AND DUES CATEGORY

☐ Category 1A
61% - 100%

☐ Category 2A
23% or less

☐ Associate

☐ Category 2A
31.5% - 50%

☐ Category 2B
26% - 33.5%

☐ Category 2B
51% - 60%

☐ Category 4
Adult Ed Hourly

NEA FUND DEDUCTION ALLOCATION (Optional)

I agree to contribute \$_____ annually to the NEA Fund. The NEA Fund for Children and Public Education (NEA Fund) collects voluntary contributions from Association members and uses these contributions for political purposes, including but not limited to, making contributions to and expenditures on behalf of friends of public education who are candidates for federal office. [See](#) review for more information.

CTA VOLUNTARY CONTRIBUTION

All CTA dues include a \$20 voluntary contribution per year to help fund CTA advocacy efforts and fund the CTA Foundation for Teaching and Learning, which provides scholarships to members and supports teacher-led efforts to improve public schools. To opt out of the voluntary contribution, complete a Voluntary Contribution Change Form. Forms are available at www.cta.org/contribution, from your local membership contact or via email at membership@cta.org.

MEMBERSHIP, DUES PAYMENT AND DUES DEDUCTION AUTHORIZATION

I, **_____**, wish to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA) and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in collective bargaining over wages, hours, and other terms and conditions of employment.

I hereby (1) agree to pay annual dues uniformly required for membership in the Local, CTA, and NEA; and (2) request that my employer to deduct from my pay (in each pay period, and transmit to CTA or its designated agent, a pro rata portion of the annual dues required for membership in the Local, CTA, and NEA, in the sum of my pay check. I fully understand that the dues required for membership in the Local, CTA, and NEA are subject to annual change by the associations' governing bodies and authorize dues payment on a continuing basis, and regardless of my membership status, unless my obligation to do so ends under one of the circumstances below. This agreement to pay dues continues from year to year until my membership status, unless I revoke it by sending written notice via U.S. mail to CTA Member Services, P.O. Box 4178, Burlingame, CA 94011, or my local CTA chapter, and not more than sixty (60) days before the annual anniversary date of this agreement; my employment with the Employer ends; or as otherwise required by law.

I understand that this agreement is voluntary and is not a condition of employment and that I have the legal right to not sign this agreement.




Member Signature

Date

CTA MEMBERSHIP DEPARTMENT COPY

Continue on the back side →

Commitment Card

 CTA CALIFORNIA TEACHERS ASSOCIATION	 nea NATIONAL EDUCATION ASSOCIATION	 STA
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MEMBERSHIP COMMITMENT CARD

Your Voice. Our Union. Our Future.

Individual Information

CTA ID:	835311	<i>Please provide any updated information on the lines provided</i>
Name:	AUDREY ABAS	_____
Home Address:	123 Cherry St	_____
	San Francisco, CA 94118-1604	_____
Landline:	(415)555-8789	_____
Cell Phone:	(650)555-2658	_____
Home Email:	aabas@test.com	_____

Membership Information

Local Name:	STAFF TCHRS ASSN	
Employer Name:	UNASSIGNED EMPLOYER # CA90001	
Work Location:	SPECIAL ED DIVISION	_____


Membership Authorization

YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of these associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in collective bargaining over wages, hours, and other terms and conditions of employment.


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Signature: _____	Date: _____
-------------------------	--------------------

PLEASE RETURN THIS FORM TO CTA MEMBERSHIP:
P.O. Box 4178, Burlingame, CA 94011
email: membershp@cta.org | fax: (650)552-5061



For Office Use Only:
 Received Date: _____
 Processed By: _____
 Processed By: _____



Run Date: 08/24/2018

Drop Process – Member Drop Request

To drop membership, all members are required to submit a written drop request letter to the local president.

Written membership drop requests ***must*** include:

- ✓ Name
- ✓ CTA Membership ID Number (If known)
- ✓ Home Address
- ✓ Full Name of Local Chapter
- ✓ Signed and dated letter of request

Drop Process – Local Procedures

What does our local do when a member intends to drop membership?

1. Contact your Primary Contact Staff
2. Check for COMMITMENT DATE
3. Contact the member directly
 - Review value of benefits & benefits at risk
4. If the member still intends to drop after your discussion, collect materials & send to the CTA Membership Department at Burlingame HQ

Local Required Materials

(Send to CTA Membership Dept in Burlingame)

- ☐ Drop Request Letter
- ☐ Drop Reason
- ☐ Verification of Contact

Drop Confirmation Letters

District Letter



TEST UNION HIGH
ATTN: Payroll
5801 Sundale Ave
Burlingame, CA 93309

To: Certificated Payroll
From: Membership Staff, CTA Membership Accounting
Date: May 23, 2019
Subject: Dropped Membership

Please note that a valid drop request has been submitted and recognized for the following bargaining unit member(s):

Bargaining Unit Member Name

- JOHN DOE

Accordingly, please discontinue payroll dues deductions for these members immediately.

Contact me directly at test@cta.org | 650-552-5278 or
CTA Membership Accounting at membership@cta.org | 650-552-5278 with any questions.

Thank you.

1705 MURCHISON DRIVE, BURLINGAME, CA 94010 • P.O. BOX 921, BURLINGAME, CA 94011-0921
650.697.1400 • WWW.CTA.ORG



May 28, 2019

JOHN DOE
20112 ABC Dr
Burlingame, CA 94010

Dear John,

We have received and processed your request to drop Active membership with the California Teachers Association, National Education Association and your Local Chapter. Your school district has been instructed by CTA to cease any payroll deductions for membership dues.

This letter confirms your status as a Non-Member and ineligibility for Membership benefits.

We encourage you to reconsider your decision to drop your membership. Our effectiveness in bargaining fair and just salaries, benefits, and working conditions is directly related to member support and the power we have in our collective voice. It's our mission to ensure educators have a seat at the table when education policies are made; and at the bargaining table where class sizes, collaboration time and salaries are set. As an Active member of your local association, CTA and NEA, you have a powerful voice in creating the policies that affect your students, your school and your classroom.

Membership means less worrying for you and more action from us. With representation at the bargaining table, liability insurance and so much more, CTA provides advice and professional advocacy on the range of issues you face as an educator: salary, working conditions, legal support, teaching and learning, and planning for your future.

Again, we hope you will reconsider your decision to leave Active membership. On the reverse side is a comparison of benefits for Members and Non-members for you to consider. We've also included a re-enrollment form to reactivate your membership.

If you have any questions, please contact your local president.

1705 MURCHISON DRIVE, BURLINGAME, CA 94010 • P.O. BOX 921, BURLINGAME, CA 94011-0921
650.697.1400 • WWW.CTA.ORG



Member's Drop Confirmation Letter

Your Advocate. Your Partner. *Your CTA.*

There are benefits when we stand together.

BENEFITS OF MEMBERSHIP	MEMBERS	NON-MEMBERS*
Salary, benefits and working conditions as stipulated by the collectively bargained agreement or "contract" between the district and the local association.	✓	✓
Voting privileges on contract ratification of the collectively bargained agreement between the district and the local association	✓	
Representation on matters pertaining to your collectively bargained agreement and other issues in the classroom	✓	✓
Joining an organization that advocates for students, staff and the education profession	✓	
Having a voice on legislative policy issues that impact student learning and working conditions in schools and colleges	✓	
Voting privileges to have a voice on positions advocated by the union, as well as in electing local chapter leaders and leaders at the state and national levels	✓	
Professional and leadership development training opportunities sponsored by CTA at the local, regional, state and national levels	✓	
Access to CTA and NEA professional development trainings by members for members looking to improve professional skills, social awareness and leadership	✓	
\$1 million employment liability insurance coverage should you get sued	✓	
Legal services and professional advice provided for: <ul style="list-style-type: none">Due process, leave rights, layoffs and California Commission on Teacher Credentialing casesCertification and classification issuesDiscrimination under federal/state laws based on race, gender, age, sexual orientation, etc.Discrimination based on union activityRetirement issues	✓	
Subscriptions to California Educator and NEA Today professional publications	✓	
CTA Death & Dismemberment Insurance	✓	
NEA Complimentary Life Insurance		
Disaster Relief Fund Grants		
Exclusive Discounted CTA and NEA Member Benefits programs <ul style="list-style-type: none">Auto and home insuranceVoluntary life and disability insuranceTravel, restaurant, theme parks and purchasing discountsCTA 403(b) Retirement Savings Plan and financial tools and resourcesFinancial services such as credit cards, credit unions, special mortgage and auto loan programsResources including "CTA Guide to Federal Student Loan Forgiveness Programs," and "Balancing Family and Work: A Guide to Pregnancy Disability and Baby Bonding Leave"And many more products, services, and discounts negotiated on behalf of, and provided to, members only	✓	

*Under the Educational Employment Relations Act (EERA), bargaining unit members have the right to representation by the exclusive representative ("local association") in their employment relationship with the public school employer.



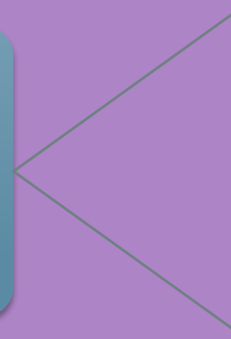
DROP SCENERIOS

MEMBER WITH
NO COMMITMENT
DATE

MEMBER WITH
COMMITMENT
DATE

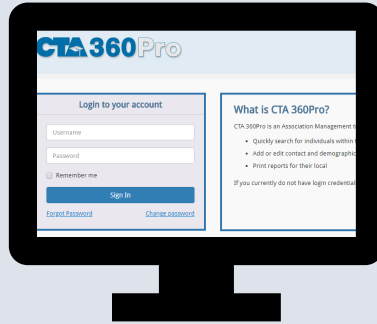
WITHIN THE
WINDOW

OUTSIDE
THE WINDOW



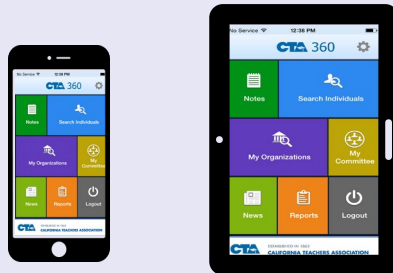


Reminders



CTA 360Pro

<https://www.cta.org/membership/cta360pro>



CTA 360

<https://www.cta.org/membership/cta360>

CTA Membership Department
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THANK YOU!