

new member
change of employer

AUTHORISATION FORM

The undersigned employee grants authorisation for the employer to deduct union dues directly from his or her pay. This agreement is in force from the first day of the month following the date on which the employer representative signed this document until further notice or up to the date of termination of the employment relationship. The employee may terminate this contract with the cancellation taking effect at the end of the next full deduction period.

The employer will deduct the union dues from the gross salary that is subject to withholding tax according to a percentage basis determined by the trade union. The percentage basis for deductions is determined for one calendar year at a time and it is not possible to alter it during this period. **Attention: Please, note that this form is not the membership application form and thus cannot be used to apply for the Union membership.** If you are not yet a member of the Union, apply first for the membership by completing an online membership application and wait for it to be processed.

Authorisation	Employer			
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Authoriser	Last name	First names (underline preferred name)		
	Personal identity number			
	 -			
	Street address		Postal code and city	
	Occupation		Type of employment	
			☐ fixed-term ☐ permanent	
	Membership in other Akava branc	h		
Payment	Recipient of union dues			
details	FINNISH UNION OF UNIVERSITY RESEARCHERS AND TEACHERS			
	Union/local branch number	Basis of amount		
	181/	% of gros	sssalary	
	Account number	SWIFT-BIC	IBAN account number	
	Danske Bank 800012-70424535	DABAFIHH	FI4780001270424535	
	Helsingin OP 554128-20012301	OKOYFIHH	FI7755412820012301	
	Nordea 101130-213982	NDEAFIHH	FI4510113000213982	
Signatures	The employee has issued this author			
	/20		-	
	Location and date		Signature	
	The employer representative has received this authorisation			
	. /20			
	Location and date		Signature	

EMPLOYER: