



Federation of Technical College Teachers Local 1942

AUTHORIZATION FOR COPE PAYROLL DEDUCTION

NAME _____ COLLEGE ____ CC
PLEASE PRINT

EMPLOYEE NO. _____

Effective at the start of the next payroll period, I hereby request and authorize the Board of Trustees of Regents for Connecticut State Colleges and Universities to deduct from my earnings each payroll period:

Deduction Action Requested (check one)

Initiate \$ _____ Cancel Immediately
Increase to \$ _____ Decrease to \$ _____

This amount shall be paid to the treasurer of the FEDERATION OF TECHNICAL COLLEGE TEACHERS for deposit to the FEDERATION OF TECHNICAL COLLEGE TEACHERS COPE FUND.

These deductions may be terminated by my giving you a thirty day written notice in advance or upon termination of my employment. A similar notice is to be sent to the union.

Employee's Signature Date

Please Print: Employee's Street Address

Please Print: City ST Zip Code