

## STAFF SENATE SUPPORT FUND PAYROLL DEDUCTION REGISTRATION FORM

The **LSUS Staff Senate** was organized for staff employees in January 1994 to serve in an advisory and consultative role with the University Administration to promote understanding, cooperation, and communication within the LSUS campus community.

The Staff Senate is made up of representatives in every EEO group on campus. Those who serve on the Staff Senate are elected by their peers or by submitting their name to serve on the Staff Senate for a three year term.

Senate meetings are held every month during the regular academic year and are open to the public. We encourage attendance and involvement on committees for all staff members.

You can also get involved by enrolling in the Staff Senate Support Fund Payroll Deduction program. For as little as \$1.00 per paycheck (\$1.33 for 9-month faculty), you will help support Staff Senate sponsored programs such as:

- The annual Faculty-Staff Holiday Luncheon\*
- The annual Faculty-Staff Spring Luncheon\*
- Tailgate parties for LSUS sporting events
- Lunch and Learn programs that promote faculty/staff personal and professional development

## **Become a Staff Senate supporter!**

☐ Yes I want to sign up for the Staff Senate Support Fund payroll deduction

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Ser or r	Senate Support Fund. My payroll deduction will continue until I cancel my membership in writing or my employment with LSUS terminates. I understand that I may cancel my membership at any		
	Employee Name	PID	
	Department	Phone	
	Employee Signature	Date	
	I au Sen or n	I authorize LSUS to deduct \$ per pay period as my contributi Senate Support Fund. My payroll deduction will continue until I cancel or my employment with LSUS terminates. I understand that I may cancel time and that all donations are non-refundable.  Employee Name  Department	I authorize LSUS to deduct \$ per pay period as my contribution to the LSUS Staff Senate Support Fund. My payroll deduction will continue until I cancel my membership in we or my employment with LSUS terminates. I understand that I may cancel my membership at time and that all donations are non-refundable.    Employee Name

Please complete and return this form to the Human Resources department in room 109 of the Administration Building.

THANK YOU FOR SUPPORTING YOUR STAFF SENATE!

<sup>\*</sup>Current members are guaranteed FREE admission to these events.