2011-2012 STUDENT APPLICATION
EDUCATION MINNESOTA STUDENT PROGRAM

An affiliate of the National Education Association and the American Federation of Teachers.

The union of 70,000 educators
www.educationminnesota.org

To apply for membership in the Education Minnesota Student Program, please complete this form and enclose with a check or money order for membership dues (do not paper clip or staple) payable to Education Minnesota. **Foreign checks and cash not accepted.**

Or you may **apply for membership after April 1, 2011 using a credit/debit card** and receive immediate confirmation of membership plus a complimentary one-year subscription to Instructor Magazine. Go to www.educationminnesota.org and click on the Student Members link in the left column.

DUES STRUCTURE		
REQUIRED ▶	NEA/AFT	$15
REQUIRED ▶	EMSP	$10
IF APPLICABLE ▶	College Chapter Dues	$

Total amount enclosed $ _____

The membership year is from September 1, 2011 – August 31, 2012.

If you have questions, concerns or problems, contact your Education Minnesota Student Program Representative.

- Tammy Barnes: (800) 642-3239, tammy.barnes@edmn.org
- Michelle Goos: (800) 622-4981, michelle.goos@edmn.org
- Greg Miller: (800) 622-7767, greg.miller@edmn.org
- Loreen McLane: (800) 642-3239, loreen.mclane@edmn.org

Enroll online or fill out this form and mail to:
Education Minnesota
ATTN: Membership Department
41 Sherburne Avenue
St Paul, MN 55103-2196

Please notify us if your address changes to ensure that membership benefits continue. Call (800) 652-9073 or (651) 227-9541 and ask for membership.
Visit www.educationminnesota.org and click on the link for Student Members in the left column for additional Member Benefits information.

COMPLETE ALL BOXES *(Please print in capital letters)* 2011-2012

To apply for membership in the Education Minnesota Student Program/NEA/AFT, please complete this form and enclose with a check or money order for membership dues (do not paper clip or staple) payable to Education Minnesota. **Foreign checks and cash not accepted.** Or **apply using a credit/debit card** and receive immediate confirmation of membership plus a complimentary one-year subscription to Instructor Magazine. Go to www.educationminnesota.org and click on the Student Members link in the left column.

Social Security Number ___ – ___ – ____ Member Number, if known 0 0 0 _____

Last Name _____ First Name _____ MI ___

Mailing Address _____ Apt # ____

City _____ State ___ Zip _____

Phone (___) ___ – ____ ☐ Home ☐ Cell Expected graduation date __ / __ / ____

Personal E-mail _____

Date of Birth __ / __ / ____ Gender ☐ Female ☐ Male

Ethnicity ☐ American Indian/Alaskan Native ☐ Black ☐ Hispanic ☐ Caucasian ☐ Asian
☐ Native Hawaiian/Pacific Islander ☐ Multi-Ethnic ☐ Other ☐ Unknown

College _____

I understand that:
1) **This membership is effective for the school year September 1, 2011, through August 31, 2012.**
2) I am obligated to pay dues as established by EMSP/NEA/AFT and my local chapter, if applicable.
3) The professional liability insurance does not provide coverage for non-teacher preparation related internship activities, etc.

_____ _____ _____
Applicant Signature Date Total amount enclosed