



# Black Faculty and Staff Caucus

At LOUISIANA STATE UNIVERSITY  
AND AGRICULTURAL AND MECHANICAL COLLEGE

## Membership Form

*Please complete and send via campus mail to:*  
c/o Roland Mitchell, 221 Peabody Hall, Baton Rouge, LA 70803

New

Renew

### JOIN the Black Faculty and Staff Caucus at Louisiana State University!

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Department: \_\_\_\_\_

Office Address: \_\_\_\_\_

Office Telephone No.: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Membership is on an annual basis.

Please check the appropriate response:

#### *Traditional Membership Options*

\_\_\_\_ \$10 Annual Membership for Classified Staff. I would also like to donate \$\_\_\_\_\_.

\_\_\_\_ \$20 Annual Membership for Professional Staff. I would also like to donate \$\_\_\_\_\_.

\_\_\_\_ \$30 Annual Membership for Faculty

\_\_\_\_ \$40 Annual Membership for Senior/Executive Leadership (AVC, Dean, VC/VP, etc.)

#### **OR...Join the GROUP 100**

##### *Group 100 Annual Membership Options (choose one)*

\_\_\_\_ Existing payroll deduction Group 100 Member – please continue my deductions; OR

\_\_\_\_ \$100 Group 100 Membership (pay by check); OR

\_\_\_\_ \$100 Group 100 Membership (I hereby authorize new payroll deduction(s)) – **see below**

**For Group 100 payroll deduction(s)**, please complete **Steps 1 and 2** and provide your Identification Number.

1 – Employee status (**check one**): \_\_\_\_\_ *Classified* \_\_\_\_\_ *Professional staff* \_\_\_\_\_ *Faculty* \_\_\_\_\_ *Senior/Executive*

2 – Deduction (**circle one**): 1) one-time deduction of \$100 2) \$3.85/ pay period for bi-monthly paid employees (*classified employees*) 3) \$8.33/month for non-classified employees paid on a 12-month basis, 4) \$11.11/month for *professional staff or faculty* paid on a 9-month basis.

**ABOUT THE GROUP 100:** Half of Group 100 members' contributions support the African American Cultural Center (AACC) and the other half supports the Black Faculty and Staff Caucus, scholarships, Black Scholars Award and other events.

\_\_\_\_ Annual Black Scholars Program. I would like to donate \$\_\_\_\_\_.

Signature \_\_\_\_\_

\*Identification Number (LSUID) \_\_\_\_\_ Date: \_\_\_\_\_