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**Membership application for University of Tartu staff**

**FIRST NAME(S):**

**SURNAME:**

**PERSONAL IDENTIFICATION CODE:**

**E-MAIL ADDRESS:**

**PHONE NUMBER:**

**POSITION AT THE UNIVERSITY OF TARTU:**

**DEPARTMENT AT THE UNIVERSITY OF TARTU:**

**WORLOAD (1,0; 0,5 etc.):**

**YEARS AT THE UNIVERSITY OF TARTU:**

**I hereby confirm that I have read the Statute of the University of Tartu Faculty Association and wish to apply for membership:**

**Signature: Date:**

*digitally signed*

Paying the membership fee:

* On the basis of an application to the University of Tartu Finance Office, the employer (University of Tartu) will transfer 1% of your gross University of Tartu monthly income to the University of Tartu Faculty Association bank account at LHV Pank EE657700771003300777.