



Teachers Association of Long Beach, CTA/NEA

4362 ATLANTIC AVENUE • LONG BEACH, CALIFORNIA 90807-2818

TELEPHONE: (562) 426-6433 • FAX: (562) 424-9352

Web Site: www.talb.org

Dear Colleague:

Welcome to the Teachers Association of Long Beach (TALB), an affiliate of the California Teachers Association (CTA) and the National Education Association (NEA). TALB is your professional Association and Union. Your membership is an important step in your support of quality public education.

TALB members enjoy:

- ✓ **\$1,000,000 professional liability policy**
- ✓ **\$3,000 Automatic TALB Survivor Benefit + \$2000 from CTA and \$1000 from NEA.**
- ✓ **Legal support and protection**
- ✓ **Representation in employment related matters**
- ✓ **Vote on contractual matters, salaries, benefits, working conditions**
- ✓ **Access to Professional libraries and services of both the California Teachers Association and National Education Association**
- ✓ **Significant discounts on home, auto, and life insurance**
- ✓ **Entertainment and travel discounts**

TALB is the exclusive bargaining agent (union) for all Child Development Center, Head Start, K-12 teachers, nurses, teacher librarians, speech pathologists, program facilitators and resource specialists. We seek to improve your salaries, benefits, and working conditions. We believe that better working conditions for teachers result in better learning conditions for students. Your Association is also involved with community organizations, lobbying, legislators, political campaigns, providing scholarships, training teachers, and providing economic services.

TALB, CTA, and NEA are confronted with major educational issues. Your union is deeply involved in and continues to work for the protection of teacher rights, including due process, instructional and professional issues, empowering teachers through Shared Decision Making, bargaining a fair and equitable contract, recruiting and retaining the very best teachers, and procuring sufficient funds for public education.

Teachers must be deeply committed and involved outside the classroom if education is to achieve its appropriate level of importance in our society. I hope that you will take an active role in TALB, as well as CTA and NEA. Your involvement and commitment are the most effective ways to improve our profession.

I wish you a very successful school year.

Respectfully,

Dr. Christine Kelly
TALB President



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New Member Checklist

Note: You are eligible to become a TALB member if you are a contracted LBUSD teacher, facilitator, nurse, teacher librarian, or speech and language pathologist. **Administrators, counselors, long term subs, and day-to-day substitute teachers are not eligible for membership and should not fill out these forms.**

- In order to become a TALB Member, you must complete the following forms and email them to Blanca Paredes at bparedes@talb.org or return the original signed hard copies to the TALB office only. Please do not put it in the District's mail.
- Complete the electronic **Membership Enrollment Form** (make sure to check the box to the left of your signature).
- Complete the **Voluntary Deduction Authorization Form**. Fill in the blanks for Employee ID, last and first name, and work site. Circle the deduction code 834 next to "TALB DUES" and write the amount of your monthly deduction. For this amount, refer to the "Annual Membership Dues/Fees Structure 2019-20" sheet. Be sure to date and sign the card.
- Complete the **TALB Survivor Benefit Information Form**.
- Return the **Membership Enrollment Form**, the **Voluntary Deduction Authorization Form**, and the **TALB Survivor Benefit Information Form** via email to: bparedes@talb.org. You may also print out and mail the original forms or drop them off in person at: TALB Office located at 4362 Atlantic Ave, Long Beach CA 90807.

If you have any questions or if you need assistance filling out these forms, you may call Blanca Paredes at (562) 426-6433 ext. 227 or email: bparedes@talb.org



Your Advocate. Your Partner. Your CTA.

Thank you for choosing a career in education. While it's personally rewarding, it's also professionally demanding. That's why NEA, CTA and your local association will provide you the support you need to be great at what you do. Being a member connects you with other educators. Together, we've been the most powerful voice for students and public education in California since 1863. And together, we still are. ***We do this by:***

- | | |
|---|---|
| <input checked="" type="checkbox"/> Negotiating fair salaries, health care and other benefits | <input checked="" type="checkbox"/> Improving learning and working conditions |
| <input checked="" type="checkbox"/> Leading student-centered educational improvements | <input checked="" type="checkbox"/> Enhancing and defending your professional rights |
| <input checked="" type="checkbox"/> Supporting your professional practice with conferences, workshops, grants and scholarships | <input checked="" type="checkbox"/> Providing cost-saving benefits designed just for educators |

PERSONAL INFORMATION

CTA Membership ID or Previous Employer/School District _____

First Name _____ MI _____

Last Name _____

Last 4 of SSN _____

Home Address _____

_____ Apt _____

City _____

State _____ Zip _____

Land Line _____

Cell Phone* _____

** See next page for information*

Home Email _____

CTA/ABC & INDEPENDENT EXPENDITURES ALLOCATION (Optional)

Designated portions of CTA dues are allocated to the Association for Better Citizenship (CTA/ABC) and to Independent Expenditures (IE) through which CTA provides financial support for education-related issues (CTA/ABC) and CTA-endorsed bipartisan candidates for local and state offices (CTA/ABC and IE).

- ☐ Please indicate if you choose not to allocate a portion of your dues to the CTA/ABC and the IE account and want all your dues to remain in the general fund.

MEMBERSHIP INFORMATION

Local Association _____

Current Employer/
School District _____

Hire Date _____ Primary Employer? Yes No

If no, list employer _____

Job Title _____

Building/Work Site _____

**TEACHING ASSIGNMENT INFORMATION
AND DUES CATEGORY**

- | | | |
|--|---|---|
| <input type="checkbox"/> Category 1
61% - 100% | <input type="checkbox"/> Category 3A
25% or less | <input type="checkbox"/> Associate |
| <input type="checkbox"/> Category 2A
33 1/3% - 50% | <input type="checkbox"/> Category 3B
26% - 33 1/3% | |
| <input type="checkbox"/> Category 2B
51% - 60% | <input type="checkbox"/> Category 4
Adult Ed Hourly | |

FOR OFFICE USE ONLY
ANNUAL DUES AMOUNTS

NEA: _____

CTA: _____

LEA: _____

NEA FUND: _____

TOTAL: \$ _____

NEA FUND DEDUCTION AUTHORIZATION (Optional)

I agree to contribute \$_____ annually to the NEA Fund. The NEA Fund for Children and Public Education (NEA Fund) collects voluntary contributions from Association members and uses these contributions for political purposes, including, but not limited to, making contributions to and expenditures on behalf of friends of public education who are candidates for federal office. ** See reverse for more information.

CTA VOLUNTARY CONTRIBUTION

All CTA dues include a \$20 voluntary contribution per year to help fund CTA advocacy efforts and fund the CTA Foundation for Teaching and Learning, which provides scholarships to members and supports teacher-led efforts to improve public schools. To opt out of the voluntary contribution, complete a Voluntary Contribution Change Form. Forms are available at www.cta.org/contribution, from your local membership contact or via email at membership@cta.org.

MEMBERSHIP, DUES PAYMENT AND DUES DEDUCTION AUTHORIZATION

YES, I want to join with my fellow employees and be a committed member of the Local Association, the California Teachers Association (CTA), and the National Education Association (NEA). I hereby request and voluntarily accept membership in these associations and agree to abide by the Constitution and Bylaws of all three associations, as they may be amended from time to time. I support the Local Association in its role as my exclusive representative in collective bargaining over wages, hours, and other terms and conditions of employment.

I hereby (1) agree to pay annual dues uniformly required for membership in the Local, CTA, and NEA; and (2) request and authorize my Employer to deduct from my pay in each pay period, and transmit to CTA or its designated agent, a pro rata portion of the annual dues required for membership in the Local, CTA, and NEA, unless I pay dues by check. I fully understand that the dues required for membership in the three associations are subject to periodic change by the associations' governing bodies and authorize dues payment on a continuing basis, and regardless of my membership status, unless my obligation to do so ends under one of the circumstances below. This agreement to pay dues continues from year to year, regardless of my membership status, unless: I revoke it by sending written notice via U.S. mail to CTA Member Services, P.O. Box 4178, Burlingame, CA 94011, not less than thirty (30) days and not more than sixty (60) days before the annual anniversary date of this agreement; my employment with the Employer ends; or as otherwise required by law.

I understand that this agreement is voluntary and is not a condition of employment and that I have the legal right not to sign this agreement.

I agree to the above Terms & Conditions.

Name/Signature _____

Date _____

DEMOGRAPHIC INFORMATION *(Optional)*

Ethnicity	<input type="checkbox"/> African American <input type="checkbox"/> American Indian/ Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian	<input type="checkbox"/> Hispanic <input type="checkbox"/> Multi-Ethnic <input type="checkbox"/> Native Hawaiian/ Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> Unknown	Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Non-Binary	Birthdate _____ (mm/dd/yyyy)
				Social Media Used:	
				<input type="checkbox"/> Instagram	<input type="checkbox"/> Pinterest
				<input type="checkbox"/> Facebook	<input type="checkbox"/> Twitter

HOW CAN WE BEST SUPPORT YOU? *(Optional)*

1. What year did you enter the profession? _____
2. I am:
☐ Already a member
☐ Transferring from another district
☐ Joining the Association today
☐ Interested in receiving more information about membership
3. Your association provides supports and tools to ensure your success with students. What tools/trainings would you like to hear more about?
☐ Classroom management (e.g. student behavior, relationships with students)
☐ Lesson planning
☐ Working with mentors and coaches
☐ Working with families
☐ Collaborating with administrators and colleagues
☐ Unpacking professional expectations (e.g. evaluations, observations)
4. Your association works to ensure that schools provide students with opportunities to be successful. Which of the following issues are most important to you?
☐ Social and racial justice
☐ Meeting the needs of students in poverty
☐ Family and community engagement
☐ Fully funded schools
☐ Education policy - *Contributing to critical decisions affecting my students, school, and district*
☐ Political advocacy - *Supporting education policies to ensure all students have opportunities to succeed*
5. Your association advocates for conditions that retain high-quality educators for every student. Which of these are you interested in learning about?
☐ Salary
☐ Educator Rights & Responsibilities
☐ Health Care Benefits
☐ Pensions and Retirement Security
☐ Student Debt and/or Finances
☐ Stretching Your Paycheck
☐ Working Conditions

MORE INFORMATION

*By providing my phone number, I understand that the NEA and its affiliates including CTA, the Local, NEA Member Benefits, and NEA360 may use automated calling technologies and/or text message me on my cellular phone on a periodic basis. NEA and its affiliates will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP in response to an NEA, CTA or Local text message to stop receiving the association's messages.

**Only U.S. citizens or lawful permanent residents may contribute to the NEA Fund. Contributions to the NEA Fund are voluntary; making a contribution is neither a condition of employment nor membership in the Association, and members have the right to refuse to contribute without suffering any reprisal. Although the NEA Fund requests an annual contribution of \$50, this is only a suggestion. A member may contribute more or less than the suggested amount, or may contribute nothing at all, without it affecting his or her membership status, rights or benefits in NEA or any of its affiliates. Contributions to the NEA Fund are not deductible as charitable contributions for federal income tax purposes. Federal law requires political committees to report the name, mailing address, occupation, and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year.



CALIFORNIA TEACHERS ASSOCIATION

Welcome to CTA!

We are so happy to welcome you to your local chapter, the California Teachers Association, and the National Education Association. Whether you are new to the profession, new to the district, or just new to CTA, we want you to know that we are here to support you and empower you to be the best educator and advocate you can be. While education is a calling, it's also a vital job and a rewarding career, and when we all work together in union, we build a stronger profession.

It's our union and our voice that ensures every student in California gets the public education they deserve, regardless of ZIP code. That's why CTA supports and advocates for the educators who are nurturing tomorrow's inventors, thinkers, artists and leaders.

With CTA, you'll never be on your own. There's always a fellow member not far away who is willing to give a helping hand, some sage advice, or a shoulder when you need it.

Be sure to visit our websites regularly to learn about happenings locally and statewide, and check your home email for important messages and involvement opportunities. Visit www.CTA.org to learn about statewide activities and resources available to members. www.CTGo.org has information about professional development opportunities and incentive grants for members to attend CTA conferences. Lastly, visit www.CTAMemberBenefits.org to take advantage of all the discounts and benefits available exclusively to you as a member of the California Teachers Association.

Again, welcome to CTA. We are so glad you joined.

1705 MURCHISON DRIVE, BURLINGAME, CA 94010 • P.O. BOX 921, BURLINGAME, CA 94011-0921

650.697.1400 • WWW.CTA.ORG

nea

MORE INFORMATION

*By providing my phone number, I understand that the NEA and its affiliates including CTA, the Local, NEA Member Benefits, and NEA360 may use automated calling technologies and/or text message me on my cellular phone on a periodic basis. NEA and its affiliates will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP in response to an NEA, CTA or Local text message to stop receiving the association's messages.

**Only U.S. citizens or lawful permanent residents may contribute to the NEA Fund. Contributions to the NEA Fund are voluntary; making a contribution is neither a condition of employment nor membership in the Association, and members have the right to refuse to contribute without suffering any reprisal. Although the NEA Fund requests an annual contribution of \$50, this is only a suggestion. A member may contribute more or less than the suggested amount, or may contribute nothing at all, without it affecting his or her membership status, rights or benefits in NEA or any of its affiliates. Contributions to the NEA Fund are not deductible as charitable contributions for federal income tax purposes. Federal law requires political committees to report the name, mailing address, occupation, and name of employer for each individual whose contributions aggregate in excess of \$200 in a calendar year.

Annual Membership Dues/Fees Structure 2019-20

K-12 61-100%	CATEGORY 1: For those unit members whose assignment is more than 60% of a full-time assignment, except for preschool, Head Start, or child care teachers whose salaries are less than the minimum K-	NEA	\$ 196.00
		CTA	\$ 720.00
		LEA/TALB	\$ <u>252.00</u>
		Annual	\$ 1,168.00
		Monthly	\$ 116.80
K-12 51-60%	CATEGORY 2B: For those unit members whose assignment is greater than 50% but not more than 60% of a full-time assignment, or full time pre-school, Head Start, or child care teachers whose salary is	NEA	\$ 196.00
		CTA	\$ 370.00
		LEA/TALB	\$ <u>144.30</u>
		Annual	\$ 710.30
		Monthly	\$ 71.03
K-12 34-50%	CATEGORY 2A: For those unit members whose assignment is greater than 1/3, but not more than 50% of a full-time assignment, or Adult	NEA	\$ 109.50
		CTA	\$ 370.00
		LEA/TALB	\$ <u>144.30</u>
		Annual	\$ 623.80
		Monthly	\$ 62.38
K-12 26-33%	CATEGORY 3B: For those faculty whose teaching assignment is greater than 25% but not more than 1/3 of a normal assignment or those faculty employed in private higher educational institutions or the University of California for whom no representation by the	NEA	\$ 109.50
		CTA	\$ 195.00
		LEA/TALB	\$ <u>70.50</u>
		Annual	\$ 375.00
		Monthly	\$ 37.50
K-12 0-25%	CATEGORY 3A: For those faculty whose teaching assignment is 25% or less than a normal assignment, including faculty on unpaid leave.	NEA	\$ 66.50
		CTA	\$ 195.00
		LEA/TALB	\$ <u>70.50</u>
		Annual	\$ 332.00
		Monthly	\$ 33.20

***NFCPE** is the National Education Association Fund for Children and Public Education. Participation is voluntary. Members are encouraged to contribute two dollars per pay period. NFCPE money can only be given to candidates for federal office.

***FACT** is the Foundation to Assist California Teachers, a non-profit organization founded and run by teachers to help teachers. Participation is voluntary. Programs include housing for retired teachers and interest free emergency loans for active teachers.

CTA dues in each category include a \$20 Voluntary Dues Contribution to support CTA Advocacy and CTA Foundation (scholarships, grants and the Institute for Teaching). Members not wishing to contribute may request a refund.

The TALB dues above include the prorated Political Action Contribution (PAC) as follows: \$7 per year ongoing PAC (can be redirected to the TALB General Fund upon request) and \$20 per year ongoing PAC (can Opt Out upon request).



LONG BEACH UNIFIED SCHOOL DISTRICT
BUSINESS DEPARTMENT – Fiscal Services
Payroll Branch

Voluntary Deduction Authorization Form

Employee ID	Last Name	First Name

Union/Membership Dues

VENDOR	CODE	NEW QW AMOUNT
ALBEM	831	
ACSA	830	
CAL ASSOC OF EDUCATORS	836	
CAL ASSOC OF SCHOOL PSYCHOLOGISTS	919	
CASSA	837	
CSEA (MEMBER DUES)	071/850	
CSEA (NON-MEMBER)	072/855	
CSEA –VICTORY CLUB	930	
TALB (MEMBER DUES)	834	
TALB (AGENCY FEE)	840	

Organizations*

VENDOR	CODE	NEW QW AMOUNT
BROTHERHOOD CRUSADES	917	
LONG BEACH EDUCATION FOUNDATION	918	
UNITED WAY CAMPAIGN	916	

Credit Unions (must have an active account with credit union)*

VENDOR	CODE	NEW QW AMOUNT
FIRST FINANCIAL CREDIT UNION (not TSA)	905	
LBS FINANCIAL CREDIT UNION (not TSA)	903	
SCHOOLS FIRST CREDIT UNION (not TSA)	907	

Fill In For Existing Vendor Not Listed Above

VENDOR	CODE	NEW QW AMOUNT

- Deductions are made 10 times during the school year (October thru June) for all employees unless 12 deductions are requested by checking the box below.
- This will be effective in the next available pay period based on the date received by the Payroll Department.
- Employee must contact insurance companies for any new enrollments or changes.
- Employee must contact Tax Shelter Annuity (TSA) and 457 plan administrators for any new enrollments or changes.

☐

*YEAR-ROUND EMPLOYEES: CHECK THIS BOX IF YOU WANT 12 ANNUAL DEDUCTIONS. ALL NEW AND EXISTING VOLUNTARY DEDUCTION AMOUNTS IN "ORGANIZATIONS" AND "CREDIT UNIONS" WILL BE DEDUCTED 12 TIMES.

I hereby authorize the Long Beach Unified School District to make the changes as indicated on this form.

EMPLOYEE SIGNATURE

DATE



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SURVIVOR BENEFIT – In a time of need...

Dear New Teacher:

TALB/CTA/NEA members are eligible to participate in our local Survivor Benefit Plan. This plan provides an immediate benefit of \$6,000 to a designated beneficiary upon the death of an active plan member. This is an automatic benefit however a beneficiary form must be turned in with the names of the selected beneficiary/ies.

Please take a moment and fill out the attached beneficiary form. Filling out this form is very important since we use it to verify the name of the designated beneficiary(ies) when issuing the survivor benefit check. Return it to the TALB office at the above address along with your completed membership form.

If you have any questions regarding this benefit or need help filling out this form, please contact Blanca Paredes at 562-426-6433 ext. 228.

Sincerely,

Dr. Christine Kelly

Teachers Association of Long Beach, CTA/NEA

TALB Survivor Benefit Information Form

Please take a moment to fill out the attached beneficiary form. Filling out this form is very important. It is used to verify the name of the designated beneficiary/ies when issuing the survivor benefit check. Please fill out the electronic form and check the box next to the signature. Email, or return it to the TALB office along with your membership form and voluntary deduction card.

MEMBER'S INFORMATION:

Last First Middle School

Street Address City Zip

Home Phone Cell Phone Home Email

Member's Social Security Number

Name of Spouse (if married)

BENEFICIARY INFORMATION *(If you have more than one beneficiary please list names and contact information in the next page, and assign a percent- age of benefit for each beneficiary.)

I DESIGNATE AS MY BENEFICIARY (IES)

Beneficiary's Name Relationship Percentage of benefit *

Home Address (if different from above) Home Phone Cell Phone



Member's Signature

Date

When filling out electronic version of this form, check box next to signature

Additional TALB Survivor Benefit Beneficiaries

Beneficiary's Name	Relationship	Percentage of benefit *
Home Address (if different from above)	Home Phone	Cell Phone
Beneficiary's Name	Relationship	Percentage of benefit *
Home Address (if different from above)	Home Phone	Cell Phone
Beneficiary's Name	Relationship	Percentage of benefit *
Home Address (if different from above)	Home Phone	Cell Phone
Beneficiary's Name	Relationship	Percentage of benefit *
Home Address (if different from above)	Home Phone	Cell Phone
Beneficiary's Name	Relationship	Percentage of benefit *
Home Address (if different from above)	Home Phone	Cell Phone



EMPLOYEE'S RIGHT TO UNION REPRESENTATION

The right of employees to have union representation at meetings with supervisors that could lead to discipline was announced by the U.S. Supreme Court in a 1975 case ([*NLRB vs. Weingarten, Inc.* 420 U.S. 251, 88 LRRM 2689](#)). These rights have become known as the *Weingarten* rights.

Employees have *Weingarten* rights during investigatory interviews and other meetings with supervisors that could lead to discipline. An investigatory interview occurs when a supervisor questions an employee to obtain information which could be used as a basis for discipline or asks an employee to defend his or her conduct.

If an employee has a reasonable belief that discipline or other adverse consequences may result from what he or she says, the employee has the right to request union representation.

When the employee makes the request for a union representative to be present management has three options:

- they can stop questioning until the representative arrives.
- they can call off the interview, or
- they can tell the employee that it will call off the interview unless the employee voluntarily gives up his/her rights to a union representative (an option the employee should always refuse.)

Employers will often assert that the only role of a union representative in an investigatory interview is to observe the discussion. The Supreme Court, however, clearly acknowledges a representative's right to assist and counsel workers during the interview.

The Supreme Court has also ruled that before an investigatory interview, management must inform the union representative of the subject of the interrogation. The representative must also be allowed to speak privately with the employee before the interview and at any time during the interview. During the questioning, the representative may interrupt to clarify a question or to object to confusing or intimidating tactics.

While the interview is in progress the representative may not tell the employee what to say but he or she may advise them on how to answer a question or to not answer the question. At the end of the interview the union representative may add information to support the employee's case.