



COLORADO STATE PARKS EMPLOYEE PROTECTIVE ASSOCIATION

NON CERTIFIED CIVILIAN MEMBERSHIP APPLICATION

NAME: _____ **SSN:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

E-MAIL ADDRESS: _____

DOB: _____ **TITLE:** _____

DATE OF EMPLOYMENT: _____

NEW MEMBER

RETURNING MEMBER, Prior Membership Dates: _____

SIGNED: _____ **DATE:** _____

Board use only below this line:

Date application "Approved" by Board: _____

Date of separation: _____

Date retirement benefit "Approved" by Board: _____

NON CERTIFIED CIVILIAN MEMBERSHIP APPLICATION

I hereby authorized the State Controller through the Division of Parks and Outdoor Recreation to deduct a total of \$18.50 per month for dues from my salary and pay the same to the Colorado State Parks Employee Protective Association (CSPEPA). I understand that this application must be presented to the CSPEPA Board of Directors for approval.

I hereby state there are no lawsuits or obligations pending against me at this time that could or may involve the CSPEPA. I understand that legal defense benefits are possible only for instances governed by the bylaws of the Association and effective only after the date of acceptance of my membership by Board vote. New, non-certified employees will not be eligible for that part of the legal defense plan pertaining to personnel actions/items until such times as the employee is certified by the state personnel system. Certified employees will not be eligible for that part of the legal defense plan pertaining to personnel actions/items until such time as they have been an association member in good standing for six months.

I hereby understand any member in good standing, having all dues and assessments paid up to date at time of application, who has reach retirement age, either by age, or years of service, or who may have a service incurred disability requiring retirement, and who applies for and is granted retirement from active service with the Colorado Division of Parks and Outdoor Recreation, shall have earned, and be entitled to a benefit not to exceed five hundred dollars (\$500) from the funds of the CSPEPA. The retirement benefit shall be based on and prorated to said member on the basis of fifty dollars (\$50) per consecutive year of membership, starting from and including the year they were accepted as a member in the CSPEPA or its predecessor organization PAW (Parks and Wildlife Employees Association).

SIGNED: _____ **DATE:** _____

Send Application to any CSPEPA representative.

Attach CSPEPA Additional Direct Deposit Form to this application.